

Fill in this information to identify the case:Debtor name Inspired Concepts, LLCUnited States Bankruptcy Court for the: Eastern District of MichiganCase number (if known): 20-20034☐ Check if this is an amended filing**Official Form 206A/B****Schedule A/B: Assets — Real and Personal Property**

12/15

Disclose all property, real and personal, which the debtor owns or in which the debtor has any other legal, equitable, or future interest. Include all property in which the debtor holds rights and powers exercisable for the debtor's own benefit. Also include assets and properties which have no book value, such as fully depreciated assets or assets that were not capitalized. In Schedule A/B, list any executory contracts or unexpired leases. Also list them on *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 206G).

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. At the top of any pages added, write the debtor's name and case number (if known). Also identify the form and line number to which the additional information applies. If an additional sheet is attached, include the amounts from the attachment in the total for the pertinent part.

For Part 1 through Part 11, list each asset under the appropriate category or attach separate supporting schedules, such as a fixed asset schedule or depreciation schedule, that gives the details for each asset in a particular category. List each asset only once. In valuing the debtor's interest, do not deduct the value of secured claims. See the instructions to understand the terms used in this form.

Part 1: Cash and cash equivalents**1. Does the debtor have any cash or cash equivalents?**

- ☐ No. Go to Part 2.
- ☒ Yes. Fill in the information below.

All cash or cash equivalents owned or controlled by the debtor**Current value of debtor's interest****2. Cash on hand**\$ 0.00**3. Checking, savings, money market, or financial brokerage accounts (Identify all)**

Name of institution (bank or brokerage firm)

Type of account

Last 4 digits of account number

3.1. PNC BankChecking9 4 8 7\$ 32,500.003.2. Fifth Third Bank (Closed)Checking1 8 5 5\$ 0.00**4. Other cash equivalents (Identify all)**

4.1. _____

\$ _____

4.2. _____

\$ _____

5. Total of Part 1\$ 32,500.00

Add lines 2 through 4 (including amounts on any additional sheets). Copy the total to line 80.

Part 2: Deposits and prepayments**6. Does the debtor have any deposits or prepayments?**

- ☐ No. Go to Part 3.
- ☒ Yes. Fill in the information below.

Current value of debtor's interest**7. Deposits, including security deposits and utility deposits**

Description, including name of holder of deposit

7.1. See Schedule A/B Part 2, Question 7 Attachment\$ 29,422.00

7.2. _____

\$ _____

Debtor Inspired Concepts, LLC
NameCase number (if known) 20-20034**8. Prepayments, including prepayments on executory contracts, leases, insurance, taxes, and rent**

Description, including name of holder of prepayment

8.1. _____ \$ _____

8.2. _____ \$ _____

9. Total of Part 2.

Add lines 7 through 8. Copy the total to line 81.

\$ 29,422.00**Part 3: Accounts receivable****10. Does the debtor have any accounts receivable?**☒ No. Go to Part 4.☐ Yes. Fill in the information below.**Current value of debtor's interest****11. Accounts receivable**11a. 90 days old or less: _____ - _____ = → \$ _____
face amount doubtful or uncollectible accounts11b. Over 90 days old: _____ - _____ = → \$ _____
face amount doubtful or uncollectible accounts**12. Total of Part 3**

Current value on lines 11a + 11b = line 12. Copy the total to line 82.

\$ _____

Part 4: Investments**13. Does the debtor own any investments?**☐ No. Go to Part 5.☒ Yes. Fill in the information below.**Valuation method used for current value****Current value of debtor's interest****14. Mutual funds or publicly traded stocks not included in Part 1**

Name of fund or stock:

14.1. _____ \$ _____

14.2. _____ \$ _____

15. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including any interest in an LLC, partnership, or joint venture

Name of entity:

% of ownership:

15.1. KJ Endeavors, LLC 100 % _____ \$ Unknown

15.2. _____ % _____ \$ _____

16. Government bonds, corporate bonds, and other negotiable and non-negotiable instruments not included in Part 1

Describe:

16.1. _____ \$ _____

16.2. _____ \$ _____

17. Total of Part 4

Add lines 14 through 16. Copy the total to line 83.

\$ 0.00

Part 5: Inventory, excluding agriculture assets**18. Does the debtor own any inventory (excluding agriculture assets)?**

- ☐ No. Go to Part 6.
☒ Yes. Fill in the information below.

General description	Date of the last physical inventory	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
19. Raw materials				
_____	MM / DD / YYYY	\$ _____	_____	\$ _____
20. Work in progress				
_____	MM / DD / YYYY	\$ _____	_____	\$ _____
21. Finished goods, including goods held for resale				
_____	MM / DD / YYYY	\$ _____	_____	\$ _____
22. Other inventory or supplies				
Food Products _____	MM / DD / YYYY	\$ _____	Estimated cost	109,000.00
				\$ _____
23. Total of Part 5				109,000.00
Add lines 19 through 22. Copy the total to line 84.				

24. Is any of the property listed in Part 5 perishable?

- ☐ No
☒ Yes

25. Has any of the property listed in Part 5 been purchased within 20 days before the bankruptcy was filed?

- ☐ No
☒ Yes. Book value _____ Valuation method Estimated cost Current value 109,000.00

26. Has any of the property listed in Part 5 been appraised by a professional within the last year?

- ☒ No
☐ Yes

Part 6: Farming and fishing-related assets (other than titled motor vehicles and land)**27. Does the debtor own or lease any farming and fishing-related assets (other than titled motor vehicles and land)?**

- ☒ No. Go to Part 7.
☐ Yes. Fill in the information below.

General description	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
28. Crops—either planted or harvested			
_____	\$ _____	_____	\$ _____
29. Farm animals <i>Examples:</i> Livestock, poultry, farm-raised fish			
_____	\$ _____	_____	\$ _____
30. Farm machinery and equipment (Other than titled motor vehicles)			
_____	\$ _____	_____	\$ _____
31. Farm and fishing supplies, chemicals, and feed			
_____	\$ _____	_____	\$ _____
32. Other farming and fishing-related property not already listed in Part 6			
_____	\$ _____	_____	\$ _____

33. **Total of Part 6.**

Add lines 28 through 32. Copy the total to line 85.

\$ _____

34. **Is the debtor a member of an agricultural cooperative?**

- ☐ No
☐ Yes. Is any of the debtor's property stored at the cooperative?
☐ No
☐ Yes

35. **Has any of the property listed in Part 6 been purchased within 20 days before the bankruptcy was filed?**

- ☐ No
☐ Yes. Book value \$ _____ Valuation method _____ Current value \$ _____

36. **Is a depreciation schedule available for any of the property listed in Part 6?**

- ☐ No
☐ Yes

37. **Has any of the property listed in Part 6 been appraised by a professional within the last year?**

- ☐ No
☐ Yes

Part 7: Office furniture, fixtures, and equipment; and collectibles38. **Does the debtor own or lease any office furniture, fixtures, equipment, or collectibles?**

- ☐ No. Go to Part 8.
☒ Yes. Fill in the information below.

General description	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
39. Office furniture Leased Misc. Office furnishings included with real property lease	\$ _____	_____	\$ 0.00
40. Office fixtures Lease of Office Copier	\$ _____	_____	\$ 0.00
41. Office equipment, including all computer equipment and communication systems equipment and software Lease of Pitney Bowes postage machine	\$ _____	_____	\$ 0.00
42. Collectibles <i>Examples:</i> Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; china and crystal; stamp, coin, or baseball card collections; other collections, memorabilia, or collectibles			
42.1 _____	\$ _____	_____	\$ _____
42.2 _____	\$ _____	_____	\$ _____
42.3 _____	\$ _____	_____	\$ _____

43. **Total of Part 7.**

Add lines 39 through 42. Copy the total to line 86.

\$ 0.00

44. **Is a depreciation schedule available for any of the property listed in Part 7?**

- ☒ No
☐ Yes

45. **Has any of the property listed in Part 7 been appraised by a professional within the last year?**

- ☒ No
☐ Yes

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Part 8: Machinery, equipment, and vehicles**46. Does the debtor own or lease any machinery, equipment, or vehicles?**

- ☐ No. Go to Part 9.
☒ Yes. Fill in the information below.

General description Include year, make, model, and identification numbers (i.e., VIN, HIN, or N-number)	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
47. Automobiles, vans, trucks, motorcycles, trailers, and titled farm vehicles			
47.1 _____	\$ _____	_____	\$ _____
47.2 _____	\$ _____	_____	\$ _____
47.3 _____	\$ _____	_____	\$ _____
47.4 _____	\$ _____	_____	\$ _____
48. Watercraft, trailers, motors, and related accessories Examples: Boats, trailers, motors, floating homes, personal watercraft, and fishing vessels			
48.1 _____	\$ _____	_____	\$ _____
48.2 _____	\$ _____	_____	\$ _____
49. Aircraft and accessories			
49.1 _____	\$ _____	_____	\$ _____
49.2 _____	\$ _____	_____	\$ _____
50. Other machinery, fixtures, and equipment (excluding farm machinery and equipment) See Schedule A/B Part 8, Question 50 Attachment			
	\$ _____	Estimated Liquidation	\$ 119,061.00
51. Total of Part 8. Add lines 47 through 50. Copy the total to line 87.			\$ 119,061.00

52. Is a depreciation schedule available for any of the property listed in Part 8?

- ☒ No
☐ Yes

53. Has any of the property listed in Part 8 been appraised by a professional within the last year?

- ☐ No
☒ Yes

Debtor Inspired Concepts, LLC
Name

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Part 9: Real property

54. Does the debtor own or lease any real property?

- ☐ No. Go to Part 10.
☒ Yes. Fill in the information below.

55. Any building, other improved real estate, or land which the debtor owns or in which the debtor has an interest

Description and location of property Include street address or other description such as Assessor Parcel Number (APN), and type of property (for example, acreage, factory, warehouse, apartment or office building), if available.	Nature and extent of debtor's interest in property	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
55.1 See Schedule A/B Part 9, Question 55 Attachment	Leased Real Property	\$ _____	_____	Unknown \$ _____
55.2		\$ _____	_____	\$ _____
55.3		\$ _____	_____	\$ _____
56. Total of Part 9. Add the current value on lines 55.1 through 55.6 and entries from any additional sheets. Copy the total to line 88.				0.00 \$ _____
57. Is a depreciation schedule available for any of the property listed in Part 9? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes				
58. Has any of the property listed in Part 9 been appraised by a professional within the last year? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes				

Part 10: Intangibles and intellectual property

59. Does the debtor have any interests in intangibles or intellectual property?

- ☐ No. Go to Part 11.
☒ Yes. Fill in the information below.

General description	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
60. Patents, copyrights, trademarks, and trade secrets _____	\$ _____	_____	\$ _____
61. Internet domain names and websites _____	\$ _____	_____	\$ _____
62. Licenses, franchises, and royalties See Schedule A/B Part 10, Question 62 Attachment	\$ _____	_____	Unknown \$ _____
63. Customer lists, mailing lists, or other compilations _____	\$ _____	_____	\$ _____
64. Other intangibles, or intellectual property Michigan Liquor Control Commission License (See Fixed Asset Sch	\$ _____	Estimated	170,000.00 \$ _____
65. Goodwill _____	\$ _____	_____	\$ _____
66. Total of Part 10. Add lines 60 through 65. Copy the total to line 89.			170,000.00 \$ _____

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67. Do your lists or records include personally identifiable information of customers (as defined in 11 U.S.C. §§ 101(41A) and 107)?

- ☒ No
☐ Yes

68. Is there an amortization or other similar schedule available for any of the property listed in Part 10?

- ☒ No
☐ Yes

69. Has any of the property listed in Part 10 been appraised by a professional within the last year?

- ☒ No
☐ Yes

Part 11: All other assets

70. Does the debtor own any other assets that have not yet been reported on this form?

Include all interests in executory contracts and unexpired leases not previously reported on this form.

- ☒ No. Go to Part 12.
☐ Yes. Fill in the information below.

Current value of
debtor's interest

71. Notes receivable

Description (include name of obligor)

_____ — _____ = → \$ _____
 Total face amount doubtful or uncollectible amount

72. Tax refunds and unused net operating losses (NOLs)

Description (for example, federal, state, local)

_____	Tax year _____	\$ _____
_____	Tax year _____	\$ _____
_____	Tax year _____	\$ _____

73. Interests in insurance policies or annuities

_____ \$ _____

74. Causes of action against third parties (whether or not a lawsuit has been filed)

_____ \$ _____

Nature of claim _____

Amount requested \$ _____

75. Other contingent and unliquidated claims or causes of action of every nature, including counterclaims of the debtor and rights to set off claims

_____ \$ _____

Nature of claim _____

Amount requested \$ _____

76. Trusts, equitable or future interests in property

_____ \$ _____

77. Other property of any kind not already listed *Examples: Season tickets, country club membership*

_____ \$ _____

_____ \$ _____

78. Total of Part 11.

Add lines 71 through 77. Copy the total to line 90.

\$ _____

79. Has any of the property listed in Part 11 been appraised by a professional within the last year?

- ☐ No
☐ Yes

Debtor

Inspired Concepts, LLC

Name

Case number (if known) 20-20034

Part 12: Summary

In Part 12 copy all of the totals from the earlier parts of the form.

Type of property	Current value of personal property	Current value of real property
80. Cash, cash equivalents, and financial assets. <i>Copy line 5, Part 1.</i>	\$ 32,500.00	
81. Deposits and prepayments. <i>Copy line 9, Part 2.</i>	\$ 29,422.00	
82. Accounts receivable. <i>Copy line 12, Part 3.</i>	\$ 0.00	
83. Investments. <i>Copy line 17, Part 4.</i>	\$ 0.00	
84. Inventory. <i>Copy line 23, Part 5.</i>	\$ 109,000.00	
85. Farming and fishing-related assets. <i>Copy line 33, Part 6.</i>	\$ 0.00	
86. Office furniture, fixtures, and equipment; and collectibles. <i>Copy line 43, Part 7.</i>	\$ 0.00	
87. Machinery, equipment, and vehicles. <i>Copy line 51, Part 8.</i>	\$ 119,061.00	
88. Real property. <i>Copy line 56, Part 9.</i> ➔		\$ 0.00
89. Intangibles and intellectual property. <i>Copy line 66, Part 10.</i>	\$ 170,000.00	
90. All other assets. <i>Copy line 78, Part 11.</i>	+ \$ 0.00	
91. Total. Add lines 80 through 90 for each column. 91a.	\$ 459,983.00	+ 91b. \$ 0.00
92. Total of all property on Schedule A/B. Lines 91a + 91b = 92. 459,983.00		\$ 459,983.00

Fill in this information to identify the case:

Debtor name Inspired Concepts, LLC
 United States Bankruptcy Court for the: Eastern District of Michigan
 Case number (if known): 20-20034

☒ Check if this is an amended filing

Official Form 206D**Schedule D: Creditors Who Have Claims Secured by Property**

12/15

Be as complete and accurate as possible.

1. Do any creditors have claims secured by debtor's property?

- ☐ No. Check this box and submit page 1 of this form to the court with debtor's other schedules. Debtor has nothing else to report on this form.
☒ Yes. Fill in all of the information below.

Part 1: List Creditors Who Have Secured Claims**2. List in alphabetical order all creditors who have secured claims.** If a creditor has more than one secured claim, list the creditor separately for each claim.

Column A Amount of claim Do not deduct the value of collateral.	Column B Value of collateral that supports this claim
---	--

2.1 **Creditor's name**
Fifth Third Bank

Creditor's mailing address
c/o Michael Messenger, Esq.
433 N. Summit St, Ninth Floor, Toledo, OH

Creditor's email address, if known
mmessenger@rcolaw.com

Date debt was incurred 10/01/2014
Last 4 digits of account number _____

Do multiple creditors have an interest in the same property?
☒ No
☐ Yes. Specify each creditor, including this creditor,

Describe debtor's property that is subject to a lien
All Asset Lien

Describe the lien
Agreement you made

Is the creditor an insider or related party?
☒ No
☐ Yes

Is anyone else liable on this claim?
☐ No
☒ Yes. Fill out *Schedule H: Codebtors* (Official Form 206H).

As of the petition filing date, the claim is:
 Check all that apply.
☐ Contingent
☐ Unliquidated
☐ Disputed

\$ <u>2,036,232.00</u>	\$ <u>400,000.00</u>
------------------------	----------------------

2.2 **Creditor's name**
Mercantile Bank

Creditor's mailing address
c/o Andre Shier, Esq.
99 Monroe Ave. NW, Suite 1100, Grand Ra

Creditor's email address, if known
acs@msblaw.com

Date debt was incurred 02/08/2017
Last 4 digits of account number _____

Do multiple creditors have an interest in the same property?
☒ No
☐ Yes. Have you already specified the relative priority?
☐ No. Specify each creditor, including this creditor, and its relative priority.

Describe debtor's property that is subject to a lien
Liens on FFE located at 4493 E. Blue Grass, Mt. Pleasant, MI

Describe the lien
Agreement you made

Is the creditor an insider or related party?
☒ No
☐ Yes

Is anyone else liable on this claim?
☐ No
☒ Yes. Fill out *Schedule H: Codebtors* (Official Form 206H).

As of the petition filing date, the claim is:
 Check all that apply.
☐ Contingent
☐ Unliquidated
☐ Disputed

\$ <u>405,193.00</u>	\$ <u>Unknown</u>
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3. Total of the dollar amounts from Part 1, Column A, including the amounts from the Additional \$ 2,441,425.00
Page, if any 20-20034-dob Doc 157 Filed 05/13/20 Entered 05/13/20 11:01:40 **Page 9 of 64**

Debtor Inspired Concepts, LLC
Name

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Part 1: Additional Page

Column A

Amount of claim

Do not deduct the value of collateral.

Column B

Value of collateral that supports this claim

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page.

2.3 **Creditor's name**
Michigan Department of Treasury

Describe debtor's property that is subject to a lien

all assets lien

\$0.00

\$0.00

Creditor's mailing address

Collections

PO Box 30199, Lansing, MI 48909

Creditor's email address, if known

Date debt was incurred 09/17/2019

Last 4 digits of account number 4632

Do multiple creditors have an interest in the same property?

☒ No

☐ Yes. Have you already specified the relative priority?

☐ No. Specify each creditor, including this creditor, and its relative priority.

☐ Yes. The relative priority of creditors is specified on lines _____

Describe the lien

tax lien

Is the creditor an insider or related party?

☒ No

☐ Yes

Is anyone else liable on this claim?

☒ No

☐ Yes. Fill out *Schedule H: Codebtors* (Official Form 206H).

As of the petition filing date, the claim is:

Check all that apply.

☐ Contingent

☒ Unliquidated

☒ Disputed

2. **Creditor's name**

Describe debtor's property that is subject to a lien

\$ _____

\$ _____

Creditor's mailing address

Creditor's email address, if known

Date debt was incurred _____

Last 4 digits of account number _____

Do multiple creditors have an interest in the same property?

☐ No

☐ Yes. Have you already specified the relative priority?

☐ No. Specify each creditor, including this creditor, and its relative priority.

☐ Yes. The relative priority of creditors is specified on lines _____

Describe the lien

Is the creditor an insider or related party?

☐ No

☐ Yes

Is anyone else liable on this claim?

☐ No

☐ Yes. Fill out *Schedule H: Codebtors* (Official Form 206H).

As of the petition filing date, the claim is:

Check all that apply.

☐ Contingent

☐ Unliquidated

☐ Disputed

Part 2: List Others to Be Notified for a Debt Already Listed in Part 1

List in alphabetical order any others who must be notified for a debt already listed in Part 1. Examples of entities that may be listed are collection agencies, assignees of claims listed above, and attorneys for secured creditors.

If no others need to be notified for the debts listed in Part 1, do not fill out or submit this page. If additional pages are needed, copy this page.

Name and address	On which line in Part 1 did you enter the related creditor?	Last 4 digits of account number for this entity
	Line 2. __	_____
	Line 2. __	_____
	Line 2. __	_____
	Line 2. __	_____
	Line 2. __	_____
	Line 2. __	_____
	Line 2. __	_____
	Line 2. __	_____
	Line 2. __	_____
	Line 2. __	_____
	Line 2. __	_____
	Line 2. __	_____
	Line 2. __	_____
	Line 2. __	_____
	Line 2. __	_____
	Line 2. __	_____

Fill in this information to identify the case:

Debtor Inspired Concepts, LLC

United States Bankruptcy Court for the: Eastern District of Michigan

Case number 20-20034
(If known)

☒ Check if this is an amended filing

Official Form 206E/F**Schedule E/F: Creditors Who Have Unsecured Claims**

12/15

Be as complete and accurate as possible. Use Part 1 for creditors with **PRIORITY** unsecured claims and Part 2 for creditors with **NONPRIORITY** unsecured claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on *Schedule A/B: Assets - Real and Personal Property* (Official Form 206A/B) and on *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 206G). Number the entries in Parts 1 and 2 in the boxes on the left. If more space is needed for Part 1 or Part 2, fill out and attach the Additional Page of that Part included in this form.

Part 1: List All Creditors with PRIORITY Unsecured Claims

1. Do any creditors have priority unsecured claims? (See 11 U.S.C. § 507).

- ☐ No. Go to Part 2.
- ☒ Yes. Go to line 2.

2. List in alphabetical order all creditors who have unsecured claims that are entitled to priority in whole or in part. If the debtor has more than 3 creditors with priority unsecured claims, fill out and attach the Additional Page of Part 1.

2.1 Priority creditor's name and mailing address

Branch County Treasurer
31 Division St.
Coldwater, MI, 49036

As of the petition filing date, the claim is: \$ Undetermined

Check all that apply.

- ☐ Contingent
☒ Unliquidated
☒ Disputed

Total claim

Priority amount

\$ _____

Date or dates debt was incurred

Basis for the claim:

Taxes & Other Government Units

Last 4 digits of account number _____

Is the claim subject to offset?

- ☒ No
☐ Yes

Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (8)

2.2 Priority creditor's name and mailing address

City of Owosso
301 West Main
Owosso, MI, 48867

As of the petition filing date, the claim is: \$ 1,712.00

Check all that apply.

- ☐ Contingent
☒ Unliquidated
☒ Disputed

\$ 1,712.00

Date or dates debt was incurred

Basis for the claim:

Taxes & Other Government Units

Last 4 digits of account number _____

Is the claim subject to offset?

- ☒ No
☐ Yes

Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (8)

2.3 Priority creditor's name and mailing address

City of Portage
7900 S. Westnedge Ave.
Portage, MI, 49002

As of the petition filing date, the claim is: \$ 11,524.00

Check all that apply.

- ☐ Contingent
☒ Unliquidated
☒ Disputed

\$ 11,312.00

Date or dates debt was incurred

Basis for the claim:

Taxes & Other Government Units

Last 4 digits of account number _____

Is the claim subject to offset?

- ☒ No
☐ Yes

Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (8)

Debtor

Inspired Concepts, LLC
NameCase number (if known) 20-20034**Part 1. Additional Page**

Copy this page if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional PRIORITY creditors exist, do not fill out or submit this page.

Total claim

Priority amount

2. ⁴ Priority creditor's name and mailing address\$ 4,768.00\$ 4,768.00Charter Twp. of Union
2010 S. Lincoln Rd.
Mount Pleasant, MI, 48858**As of the petition filing date, the claim is:***Check all that apply.*

- ☐ Contingent
☒ Unliquidated
☒ Disputed

Date or dates debt was incurred

Basis for the claim:

Last 4 digits of account
numberTaxes & Other Government UnitsSpecify Code subsection of PRIORITY unsecured
claim: 11 U.S.C. § 507(a) (8)

Is the claim subject to offset?

- ☒ No
☐ Yes

2. ⁵ Priority creditor's name and mailing address\$ 3,273.00\$ 3,273.00City of Cadillac
200 N. Lake St.
Cadillac, MI, 49601**As of the petition filing date, the claim is:***Check all that apply.*

- ☐ Contingent
☒ Unliquidated
☒ Disputed

Date or dates debt was incurred

Basis for the claim:

Last 4 digits of account
numberTaxes & Other Government UnitsSpecify Code subsection of PRIORITY unsecured
claim: 11 U.S.C. § 507(a) (8)

Is the claim subject to offset?

- ☒ No
☐ Yes

2. ⁶ Priority creditor's name and mailing address\$ 1,081.00\$ 1,081.00City of Gaylord
305 E. Main St.
Gaylord, MI, 49735**As of the petition filing date, the claim is:***Check all that apply.*

- ☐ Contingent
☒ Unliquidated
☒ Disputed

Date or dates debt was incurred

Basis for the claim:

Last 4 digits of account
numberTaxes & Other Government UnitsSpecify Code subsection of PRIORITY unsecured
claim: 11 U.S.C. § 507(a) (8)

Is the claim subject to offset?

- ☒ No
☐ Yes

2. ⁷ Priority creditor's name and mailing address\$ 3,073.00\$ 3,073.00City of Midland
333 W. Ellsworth St.
Midland, MI, 48640**As of the petition filing date, the claim is:***Check all that apply.*

- ☐ Contingent
☒ Unliquidated
☒ Disputed

Date or dates debt was incurred

Basis for the claim:

Last 4 digits of account
numberTaxes & Other Government UnitsSpecify Code subsection of PRIORITY unsecured
claim: 11 U.S.C. § 507(a) (8)

Is the claim subject to offset?

- ☒ No
☐ Yes

Debtor

Inspired Concepts, LLC
Name

Case number (if known) 20-20034

Part 1. Additional Page

Copy this page if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional PRIORITY creditors exist, do not fill out or submit this page.

Total claim

Priority amount

2. ⁸ Priority creditor's name and mailing addressCity of Mt. Pleasant
PO Box 503
Mount Pleasant, MI, 48804

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☒ Unliquidated
☒ Disputed

\$ 7,147.00

\$ 7,147.00

Date or dates debt was incurred

Basis for the claim:

Last 4 digits of account
number

Taxes & Other Government Units

Specify Code subsection of PRIORITY unsecured
claim: 11 U.S.C. § 507(a) (8)

Is the claim subject to offset?

- ☒ No
☐ Yes

2. ⁹ Priority creditor's name and mailing addressCity of Northville Tax Department
44405 Six Mile
South Monroe, MI, 48168

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☒ Unliquidated
☒ Disputed

\$ 701.00

\$ 701.00

Date or dates debt was incurred

Basis for the claim:

Last 4 digits of account
number

Taxes & Other Government Units

Specify Code subsection of PRIORITY unsecured
claim: 11 U.S.C. § 507(a) (8)

Is the claim subject to offset?

- ☒ No
☐ Yes

2. ¹⁰ Priority creditor's name and mailing addressCity of Rochester Hills
1000 Rochester Hills Drive
Rochester, MI, 48309

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☒ Unliquidated
☒ Disputed

\$ 2,462.00

\$ 2,462.00

Date or dates debt was incurred

Basis for the claim:

Last 4 digits of account
number

Taxes & Other Government Units

Specify Code subsection of PRIORITY unsecured
claim: 11 U.S.C. § 507(a) (8)

Is the claim subject to offset?

- ☒ No
☐ Yes

2. ¹¹ Priority creditor's name and mailing addressCity of Troy
PO Box 554754
Detroit, MI, 48255

As of the petition filing date, the claim is: \$ 863.00

\$ 863.00

Check all that apply.

- ☐ Contingent
☒ Unliquidated
☒ Disputed

Date or dates debt was incurred

Basis for the claim:

Last 4 digits of account
number

Taxes & Other Government Units

Specify Code subsection of PRIORITY unsecured
claim: 11 U.S.C. § 507(a) (8)

Is the claim subject to offset?

- ☒ No
☐ Yes

Debtor

Inspired Concepts, LLC
Name

Case number (if known) 20-20034

Part 1. Additional Page

Copy this page if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional PRIORITY creditors exist, do not fill out or submit this page.

Total claim

Priority amount

2. ¹² Priority creditor's name and mailing addressDeKalb County Treasurer
100 South Main St.
Auburn, IN, 46706

As of the petition filing date, the claim is:

\$ 1,090.00

\$

Check all that apply.

- ☐ Contingent
☒ Unliquidated
☒ Disputed

Date or dates debt was incurred

Basis for the claim:

Last 4 digits of account
number

Taxes & Other Government Units

Specify Code subsection of PRIORITY unsecured
claim: 11 U.S.C. § 507(a) (8)

Is the claim subject to offset?

- ☒ No
☐ Yes

2. ¹³ Priority creditor's name and mailing addressInternal Revenue Service
Centralized Insolvency Operations
PO Box 7346
Philadelphia, PA, 19101-7346

As of the petition filing date, the claim is:

\$ Undetermined

\$

Check all that apply.

- ☐ Contingent
☒ Unliquidated
☒ Disputed

Date or dates debt was incurred

Basis for the claim:

Last 4 digits of account
number 1178

Taxes & Other Government Units

Specify Code subsection of PRIORITY unsecured
claim: 11 U.S.C. § 507(a) (8)

Is the claim subject to offset?

- ☒ No
☐ Yes

2. ¹⁴ Priority creditor's name and mailing addressIsabella County Treasurer
200 Main St., #245
Mount Pleasant, MI, 48858

As of the petition filing date, the claim is:

\$ Undetermined

\$

Check all that apply.

- ☐ Contingent
☒ Unliquidated
☒ Disputed

Date or dates debt was incurred

Basis for the claim:

Last 4 digits of account
number

Taxes & Other Government Units

Specify Code subsection of PRIORITY unsecured
claim: 11 U.S.C. § 507(a) (8)

Is the claim subject to offset?

- ☒ No
☐ Yes

2. ¹⁵ Priority creditor's name and mailing addressMichigan Dept. Treasury
Business Tax Section
PO Box 30427
Lansing, MI, 48909

As of the petition filing date, the claim is:

\$ 572,864.00

\$ 572,864.00

Check all that apply.

- ☐ Contingent
☒ Unliquidated
☒ Disputed

Date or dates debt was incurred

Basis for the claim:

Last 4 digits of account
number 1178

Taxes & Other Government Units

Specify Code subsection of PRIORITY unsecured
claim: 11 U.S.C. § 507(a) (8)

Is the claim subject to offset?

- ☒ No
☐ Yes

Debtor

Inspired Concepts, LLC
NameCase number (if known) 20-20034**Part 1. Additional Page**

Copy this page if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional PRIORITY creditors exist, do not fill out or submit this page.

Total claim

Priority amount

2. ¹⁶ Priority creditor's name and mailing addressMidland County Treasurer
220 N. Ellsworth St.
Midland, MI, 48640

As of the petition filing date, the claim is:

\$ Undetermined

\$ _____

Check all that apply.

- ☐ Contingent
☒ Unliquidated
☒ Disputed

Date or dates debt was incurred

Basis for the claim:

Last 4 digits of account
number _____Taxes & Other Government UnitsSpecify Code subsection of PRIORITY unsecured
claim: 11 U.S.C. § 507(a) (8)

Is the claim subject to offset?

- ☒ No
☐ Yes

2. ¹⁷ Priority creditor's name and mailing addressOakland County Treasurer
1200 N. Telegraph
Building 12E
Pontiac, MI, 48341

As of the petition filing date, the claim is:

\$ Undetermined

\$ _____

Check all that apply.

- ☐ Contingent
☒ Unliquidated
☒ Disputed

Date or dates debt was incurred

Basis for the claim:

Last 4 digits of account
number _____Taxes & Other Government UnitsSpecify Code subsection of PRIORITY unsecured
claim: 11 U.S.C. § 507(a) (8)

Is the claim subject to offset?

- ☒ No
☐ Yes

2. ¹⁸ Priority creditor's name and mailing addressOgemaw County Treasurer
806 W. Houghton Ave., #103
West Branch, MI, 48661

As of the petition filing date, the claim is:

\$ Undetermined

\$ _____

Check all that apply.

- ☐ Contingent
☒ Unliquidated
☒ Disputed

Date or dates debt was incurred

Basis for the claim:

Last 4 digits of account
number _____Taxes & Other Government UnitsSpecify Code subsection of PRIORITY unsecured
claim: 11 U.S.C. § 507(a) (8)

Is the claim subject to offset?

- ☒ No
☐ Yes

2. ¹⁹ Priority creditor's name and mailing addressOtsego County Treasurer
225 W. Main St., #107
Gaylord, MI, 49735

As of the petition filing date, the claim is:

\$ Undetermined

\$ _____

Check all that apply.

- ☐ Contingent
☒ Unliquidated
☒ Disputed

Date or dates debt was incurred

Basis for the claim:

Last 4 digits of account
number _____Taxes & Other Government UnitsSpecify Code subsection of PRIORITY unsecured
claim: 11 U.S.C. § 507(a) (8)

Is the claim subject to offset?

- ☒ No
☐ Yes

Debtor

Inspired Concepts, LLC
Name

Case number (if known) 20-20034

Part 1. Additional Page

Copy this page if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional PRIORITY creditors exist, do not fill out or submit this page.

Total claim

Priority amount

2. ²⁰ **Priority creditor's name and mailing address**Saginaw County Treasurer
111 S. Michigan Ave.
Room 107
Saginaw, MI, 48602

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☒ Unliquidated
☒ Disputed

\$ Undetermined

\$

Date or dates debt was incurred

Basis for the claim:

Last 4 digits of account
number

Taxes & Other Government Units

Specify Code subsection of PRIORITY unsecured
claim: 11 U.S.C. § 507(a) (8)

Is the claim subject to offset?

- ☒ No
☐ Yes

2. ²¹ **Priority creditor's name and mailing address**Saginaw Twp.
PO Box 6400
Saginaw, MI, 48608

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☒ Unliquidated
☒ Disputed

\$ 2,110.00

\$ 2,110.00

Date or dates debt was incurred

Basis for the claim:

Last 4 digits of account
number

Taxes & Other Government Units

Specify Code subsection of PRIORITY unsecured
claim: 11 U.S.C. § 507(a) (8)

Is the claim subject to offset?

- ☒ No
☐ Yes

2. ²² **Priority creditor's name and mailing address**Shiawasee County Treasurer
208 N. Shiawasee, #2
Corunna, MI, 48817

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☒ Unliquidated
☒ Disputed

\$ Undetermined

\$

Date or dates debt was incurred

Basis for the claim:

Last 4 digits of account
number

Taxes & Other Government Units

Specify Code subsection of PRIORITY unsecured
claim: 11 U.S.C. § 507(a) (8)

Is the claim subject to offset?

- ☒ No
☐ Yes

2. ²³ **Priority creditor's name and mailing address**Wayne County Treasurer
400 Monroe St.
Fifth Floor
Detroit, MI, 48226

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☒ Unliquidated
☒ Disputed

\$ Undetermined

\$

Date or dates debt was incurred

Basis for the claim:

Last 4 digits of account
number

Taxes & Other Government Units

Specify Code subsection of PRIORITY unsecured
claim: 11 U.S.C. § 507(a) (8)

Is the claim subject to offset?

- ☒ No
☐ Yes

Debtor

Inspired Concepts, LLC
Name

Case number (if known) 20-20034

Part 1. Additional Page

Copy this page if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional PRIORITY creditors exist, do not fill out or submit this page.

Total claim

Priority amount

2. ²⁴ Priority creditor's name and mailing address

\$ 674.00

\$ 674.00

West Bloomfield Twp.
4550 Walnut Lake Rd.
West Bloomfield, MI, 48323

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☒ Unliquidated
☒ Disputed

Date or dates debt was incurred

Basis for the claim:

Last 4 digits of account
number

Taxes & Other Government Units

Specify Code subsection of PRIORITY unsecured
claim: 11 U.S.C. § 507(a) (8)

Is the claim subject to offset?

- ☒ No
☐ Yes

2. ²⁵ Priority creditor's name and mailing address

\$ 5,223.00

\$ 5,223.00

West Branch Twp.
1705 S Fairview
Mulliken, MI, 48861

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☒ Unliquidated
☒ Disputed

Date or dates debt was incurred

Basis for the claim:

Last 4 digits of account
number

Taxes & Other Government Units

Specify Code subsection of PRIORITY unsecured
claim: 11 U.S.C. § 507(a) (8)

Is the claim subject to offset?

- ☒ No
☐ Yes

2. ²⁶ Priority creditor's name and mailing address

\$ Undetermined

\$

Wexford County Treasurer
437 E. Division St.
Cadillac, MI, 49601

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☒ Unliquidated
☒ Disputed

Date or dates debt was incurred

Basis for the claim:

Last 4 digits of account
number

Taxes & Other Government Units

Specify Code subsection of PRIORITY unsecured
claim: 11 U.S.C. § 507(a) (8)

Is the claim subject to offset?

- ☒ No
☐ Yes

2. ²⁷ Priority creditor's name and mailing address

As of the petition filing date, the claim is: \$ \$

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Date or dates debt was incurred

Basis for the claim:

Last 4 digits of account
number

Is the claim subject to offset?

Specify Code subsection of PRIORITY unsecured
claim: 11 U.S.C. § 507(a) ()

- ☐ No
☐ Yes

Debtor

Inspired Concepts, LLC
Name

Case number (if known) 20-20034

Part 2: List All Creditors with NONPRIORITY Unsecured Claims

3. List in alphabetical order all of the creditors with nonpriority unsecured claims. If the debtor has more than 6 creditors with nonpriority unsecured claims, fill out and attach the Additional Page of Part 2.

		Amount of claim
3.1	Nonpriority creditor's name and mailing address 21st Century Media - Michigan PO Box 8003 Willoughby, OH, 44096 Date or dates debt was incurred <u>12/2019</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: Services Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes \$ <u>2,000.00</u>
3.2	Nonpriority creditor's name and mailing address Advanced Mechanical Services 19466 18 Mile Rd. Leroy, MI, 49655 Date or dates debt was incurred <u>03/2019</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Services Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes \$ <u>1,245.00</u>
3.3	Nonpriority creditor's name and mailing address Advanced Technology Services 1348 Delta Dr. Saginaw, MI, 48638 Date or dates debt was incurred <u>10/2019</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Services Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes \$ <u>1,025.00</u>
3.4	Nonpriority creditor's name and mailing address Airgas USA 6055 Rockside Woods Blvd. Independence, OH, 44131 Date or dates debt was incurred <u>12/2019</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Suppliers or Vendors Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes \$ <u>295.00</u>
3.5	Nonpriority creditor's name and mailing address All Season Experts LLC 10351 E. Wing Rd. Shepherd, MI, 48883 Date or dates debt was incurred <u>09/2019</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Services Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes \$ <u>344.00</u>
3.6	Nonpriority creditor's name and mailing address Anytime Septic 671 W. Girard Rd. Saginaw, MI, 48603 Date or dates debt was incurred <u>03/2019</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Services Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes \$ <u>250.00</u>

Debtor Inspired Concepts, LLC
 Name _____

 Case number (if known) 20-20034
Part 2: Additional Page

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional NONPRIORITY creditors exist, do not fill out or submit this page.

Amount of claim

3.⁷ Nonpriority creditor's name and mailing address Back of House Services PO Box 95 Owosso, MI, 48867	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Services	\$ 653.00
Date or dates debt was incurred <u>12/2019</u> Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.⁸ Nonpriority creditor's name and mailing address Bell Landscaping 5247 N. Westervelt Rd. Saginaw, MI, 48604	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Services	\$ 300.00
Date or dates debt was incurred <u>12/2019</u> Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.⁹ Nonpriority creditor's name and mailing address Bestway Co. 3275 Bowman Rd Bay City, MI, 48706	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Services	\$ 260.00
Date or dates debt was incurred <u>01/2020</u> Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.¹⁰ Nonpriority creditor's name and mailing address Brink's U.S. PO Box 619031 Dallas, TX, 75261	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Services	\$ 5,725.00
Date or dates debt was incurred <u>11/2019</u> Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.¹¹ Nonpriority creditor's name and mailing address Cadillac News PO Box 640 130 N. Mitchell St. Cadillac, MI, 49601	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Services	\$ 139.00
Date or dates debt was incurred <u>11/2019</u> Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

Debtor Inspired Concepts, LLC
NameCase number (if known) 20-20034**Part 2: Additional Page**

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional NONPRIORITY creditors exist, do not fill out or submit this page.

Amount of claim

3. ¹²	Nonpriority creditor's name and mailing address Capitol One/Spark Business PO Box 30285 Salt Lake City, UT, 84130	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ <u>20,000.00</u>
	Date or dates debt was incurred <u>11/2019</u> Last 4 digits of account number _____	Basis for the claim: Credit Card Debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3. ¹³	Nonpriority creditor's name and mailing address Central Plumbing 600 N. Mission St. Mount Pleasant, MI, 48858	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ <u>496.00</u>
	Date or dates debt was incurred <u>12/2019</u> Last 4 digits of account number _____	Basis for the claim: Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3. ¹⁴	Nonpriority creditor's name and mailing address CharBhan Holdings, LLC 555 S. Mission St. Mount Pleasant, MI, 48858	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ <u>11,725.00</u>
	Date or dates debt was incurred _____ Last 4 digits of account number _____	Basis for the claim: Other Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3. ¹⁵	Nonpriority creditor's name and mailing address Chimney Champ 1003 Sylvan Lane Midland, MI, 48640	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ <u>160.00</u>
	Date or dates debt was incurred <u>12/2019</u> Last 4 digits of account number _____	Basis for the claim: Services Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3. ¹⁶	Nonpriority creditor's name and mailing address Cintas Corp. 3524 S. Canal Suite C Lansing, MI, 48917	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ <u>596.00</u>
	Date or dates debt was incurred <u>01/2020</u> Last 4 digits of account number _____	Basis for the claim: Suppliers or Vendors Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

Debtor Inspired Concepts, LLC
Name

Case number (if known) 20-20034

Part 2: Additional Page

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional NONPRIORITY creditors exist, do not fill out or submit this page.

Amount of claim

3. ¹⁷ Nonpriority creditor's name and mailing address

Clayton Garrett
c/o Sam Bernstein Law Firm
31731 Northwestern Hwy., Suite 333
Farmington, MI, 48334

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☒ Unliquidated
☒ Disputed

\$ 10,000.00

Basis for the claim: Personal Injury

Is the claim subject to offset?

- ☒ No
☐ Yes

Date or dates debt was incurred

2018

Last 4 digits of account number

3. ¹⁸ Nonpriority creditor's name and mailing address

Clean Earth Environmental
5189 King Hwy.
Kalamazoo, MI, 49048

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

\$ 295.00

Basis for the claim: Services

Is the claim subject to offset?

- ☒ No
☐ Yes

Date or dates debt was incurred

11/2019

Last 4 digits of account number

3. ¹⁹ Nonpriority creditor's name and mailing address

Coca-Cola
PO Box 102703
Atlanta, GA, 30368

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☒ Unliquidated
☒ Disputed

\$ 4,739.00

Basis for the claim: Suppliers or Vendors

Is the claim subject to offset?

- ☒ No
☐ Yes

Date or dates debt was incurred

08/2019

Last 4 digits of account number

3. ²⁰ Nonpriority creditor's name and mailing address

Coldwater Board of Public Utilities
One Grand St.
Coldwater, MI, 49036

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

\$ 4,987.00

Basis for the claim: Utility Services

Is the claim subject to offset?

- ☒ No
☐ Yes

Date or dates debt was incurred

03/2019

Last 4 digits of account number

3. ²¹ Nonpriority creditor's name and mailing address

Commercial Kitchen Service Co.
704 E. John St.
PO Box 567
Bay City, MI, 48707

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

\$ 192.00

Basis for the claim: Services

Is the claim subject to offset?

- ☒ No
☐ Yes

Date or dates debt was incurred

12/2019

Last 4 digits of account number

Debtor Inspired Concepts, LLC
NameCase number (if known) 20-20034**Part 2: Additional Page**

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional NONPRIORITY creditors exist, do not fill out or submit this page.

Amount of claim

3. ²² Nonpriority creditor's name and mailing addressCompeat, Inc.
PO Box 120397
Dallas, TX, 75312

As of the petition filing date, the claim is:

Check all that apply.

- ☐
- Contingent
-
- ☐
- Unliquidated
-
- ☐
- Disputed

\$ 37,773.00

Basis for the claim: Restaurant Management Software

Is the claim subject to offset?

- ☒
- No
-
- ☐
- Yes

Date or dates debt was incurred

03/2019

Last 4 digits of account number

3. ²³ Nonpriority creditor's name and mailing addressConsumers Energy
PO Box 740309
Cincinnati, OH, 45274

As of the petition filing date, the claim is:

Check all that apply.

- ☐
- Contingent
-
- ☐
- Unliquidated
-
- ☐
- Disputed

\$ 30,694.00

Basis for the claim: Utility Services

Is the claim subject to offset?

- ☒
- No
-
- ☐
- Yes

Date or dates debt was incurred

01/2020

Last 4 digits of account number

3. ²⁴ Nonpriority creditor's name and mailing addressConway MacKenzie, Inc.
401 S. Old Woodward
Suite 340
Birmingham, MI, 48009

As of the petition filing date, the claim is:

Check all that apply.

- ☐
- Contingent
-
- ☐
- Unliquidated
-
- ☐
- Disputed

\$ 40,373.00

Basis for the claim: Financial Services

Is the claim subject to offset?

- ☒
- No
-
- ☐
- Yes

Date or dates debt was incurred

03/2019

Last 4 digits of account number

3. ²⁵ Nonpriority creditor's name and mailing addressCozzini Bros. Nationwide Sharpening
350 Howard Ave.
Des Plaines, IL, 60018

As of the petition filing date, the claim is:

Check all that apply.

- ☐
- Contingent
-
- ☐
- Unliquidated
-
- ☐
- Disputed

\$ 38.00

Basis for the claim: Services

Is the claim subject to offset?

- ☒
- No
-
- ☐
- Yes

Date or dates debt was incurred

11/2019

Last 4 digits of account number

3. ²⁶ Nonpriority creditor's name and mailing addressCrossroads Digital Outdoor
200 N. Washington Square
Suite 440
Lansing, MI, 48933

As of the petition filing date, the claim is:

Check all that apply.

- ☐
- Contingent
-
- ☐
- Unliquidated
-
- ☐
- Disputed

\$ 6,000.00

Basis for the claim: Advertising/Marketing

Is the claim subject to offset?

- ☒
- No
-
- ☐
- Yes

Date or dates debt was incurred

11/2019

Last 4 digits of account number

Debtor Inspired Concepts, LLC
NameCase number (if known) 20-20034**Part 2: Additional Page**

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional NONPRIORITY creditors exist, do not fill out or submit this page.

Amount of claim

3. ²⁷ Nonpriority creditor's name and mailing addressCumulus Broadcasting
3653 Momentum Place
Chicago, IL, 60689

As of the petition filing date, the claim is:

Check all that apply.

- ☐
- Contingent
-
- ☐
- Unliquidated
-
- ☐
- Disputed

\$ 623.00

Basis for the claim: Services

Is the claim subject to offset?

- ☒
- No
-
- ☐
- Yes

Date or dates debt was incurred 11/2018

Last 4 digits of account number _____

3. ²⁸ Nonpriority creditor's name and mailing addressD. Baker and Son Plumbing
985 E. State Rd. 120
Fremont, IN, 46737

As of the petition filing date, the claim is:

Check all that apply.

- ☐
- Contingent
-
- ☐
- Unliquidated
-
- ☐
- Disputed

\$ 255.00

Basis for the claim: Services

Is the claim subject to offset?

- ☒
- No
-
- ☐
- Yes

Date or dates debt was incurred 03/2019

Last 4 digits of account number _____

3. ²⁹ Nonpriority creditor's name and mailing addressDayMark Safety Systems
12836 S. Dixie Hwy.
Bowling Green, OH, 43402

As of the petition filing date, the claim is:

Check all that apply.

- ☐
- Contingent
-
- ☐
- Unliquidated
-
- ☐
- Disputed

\$ 65.00

Basis for the claim: Services

Is the claim subject to offset?

- ☒
- No
-
- ☐
- Yes

Date or dates debt was incurred 11/2019

Last 4 digits of account number _____

3. ³⁰ Nonpriority creditor's name and mailing addressDirect TV
PO Box 5006
Carol Stream, IL, 60197

As of the petition filing date, the claim is:

Check all that apply.

- ☐
- Contingent
-
- ☐
- Unliquidated
-
- ☐
- Disputed

\$ 607.00

Basis for the claim: Utility Services

Is the claim subject to offset?

- ☒
- No
-
- ☐
- Yes

Date or dates debt was incurred 12/2019

Last 4 digits of account number _____

3. ³¹ Nonpriority creditor's name and mailing addressDover Grease Traps, Inc.
16585 13 Mile Rd.
Fraser, MI, 48026

As of the petition filing date, the claim is:

Check all that apply.

- ☐
- Contingent
-
- ☐
- Unliquidated
-
- ☐
- Disputed

\$ 2,458.00

Basis for the claim: Services

Is the claim subject to offset?

- ☒
- No
-
- ☐
- Yes

Date or dates debt was incurred 07/2019

Last 4 digits of account number _____

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Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional NONPRIORITY creditors exist, do not fill out or submit this page.

Amount of claim

3. ³²	Nonpriority creditor's name and mailing address Drain Doctors 13000 15 Mile Rd. Marshall, MI, 49068	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ <u>300.00</u>
	Date or dates debt was incurred <u>03/2019</u> Last 4 digits of account number _____	Basis for the claim: Services Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3. ³³	Nonpriority creditor's name and mailing address DTE Energy Attn: Legal Dept. One Energy Plaza Detroit, MI, 48226	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ <u>4,177.00</u>
	Date or dates debt was incurred <u>12/2019</u> Last 4 digits of account number _____	Basis for the claim: Utility Services Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3. ³⁴	Nonpriority creditor's name and mailing address ECOLAB PO Box 70343 Chicago, IL, 60673	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ <u>3,296.00</u>
	Date or dates debt was incurred <u>09/2019</u> Last 4 digits of account number _____	Basis for the claim: Services Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3. ³⁵	Nonpriority creditor's name and mailing address Ecolab Food Safety Specialists 24198 Network Place Chicago, IL, 60673	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ <u>719.00</u>
	Date or dates debt was incurred <u>11/2019</u> Last 4 digits of account number _____	Basis for the claim: Services Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3. ³⁶	Nonpriority creditor's name and mailing address Elite Steam 620 N. Antler St. Gladwin, MI, 48624	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	\$ <u>350.00</u>
	Date or dates debt was incurred <u>08/2019</u> Last 4 digits of account number _____	Basis for the claim: Services Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

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Amount of claim

3. ³⁷	Nonpriority creditor's name and mailing address Elliot Food Equipment 2224 West Willow St. Lansing, MI, 48917	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ <u>1,142.00</u>
	Date or dates debt was incurred <u>10/2019</u> Last 4 digits of account number _____	Basis for the claim: Services Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3. ³⁸	Nonpriority creditor's name and mailing address Empire Heating & Cooling 1117 E. 10 Mile Rd. Madison Heights, MI, 48071	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ <u>796.00</u>
	Date or dates debt was incurred <u>12/2019</u> Last 4 digits of account number _____	Basis for the claim: Services Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3. ³⁹	Nonpriority creditor's name and mailing address eXtreme Power Washing 1044 N. Iva Rd Hemlock, MI, 48626	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ <u>125.00</u>
	Date or dates debt was incurred <u>10/2019</u> Last 4 digits of account number _____	Basis for the claim: Services Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3. ⁴⁰	Nonpriority creditor's name and mailing address G&S Mechanical 2736 North Johnson Rd. Weidman, MI, 48893	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ <u>1,467.00</u>
	Date or dates debt was incurred <u>11/2019</u> Last 4 digits of account number _____	Basis for the claim: Services Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3. ⁴¹	Nonpriority creditor's name and mailing address Gary Hutchinson 2141 Orr Rd. Caro, MI, 48273	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ <u>712.00</u>
	Date or dates debt was incurred <u>01/2020</u> Last 4 digits of account number _____	Basis for the claim: Services Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

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Amount of claim

3. ⁴² Nonpriority creditor's name and mailing address Gordon Food Service 8040 Kensington Ct. Brighton, MI, 48116	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Suppliers or Vendors Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$ 997,095.00
Date or dates debt was incurred <u>01/2019</u> Last 4 digits of account number _____		
3. ⁴³ Nonpriority creditor's name and mailing address Graheks 515 E. 13th St. Cadillac, MI, 49601	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Services Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$ 2,231.00
Date or dates debt was incurred <u>07/2019</u> Last 4 digits of account number _____		
3. ⁴⁴ Nonpriority creditor's name and mailing address Halo Branded Solutions 3182 Momentum Place Chicago, IL, 60689	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Services Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$ 201.00
Date or dates debt was incurred <u>11/2019</u> Last 4 digits of account number _____		
3. ⁴⁵ Nonpriority creditor's name and mailing address Happy Tappy Draft Beer Services 500 Garfield Ave. Bay City, MI, 48708	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Services Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$ 96.00
Date or dates debt was incurred <u>11/2019</u> Last 4 digits of account number _____		
3. ⁴⁶ Nonpriority creditor's name and mailing address Hoodz 36955 Amrhein Rd. Livonia, MI, 48150	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: Services Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$ 800.00
Date or dates debt was incurred <u>07/2019</u> Last 4 digits of account number _____		

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Amount of claim

3. ⁴⁷	Nonpriority creditor's name and mailing address IGS Energy PO Box 936626 Atlanta, GA, 31193	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Utility Services	\$ 14,443.00
	Date or dates debt was incurred <u>09/2019</u> Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3. ⁴⁸	Nonpriority creditor's name and mailing address Industrial Steam Cleaning 290 University Dr. Pontiac, MI, 48342	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Services	\$ 375.00
	Date or dates debt was incurred <u>12/2019</u> Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3. ⁴⁹	Nonpriority creditor's name and mailing address Inspired Concepts Management, LLC 555 S. Mission St. Mount Pleasant, MI, 48858	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Other	\$ 59,612.00
	Date or dates debt was incurred <u>07/2015</u> Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3. ⁵⁰	Nonpriority creditor's name and mailing address Johnson & Wood 3234 Associates Dr. Burton, MI, 48529	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Services	\$ 1,489.00
	Date or dates debt was incurred <u>07/2019</u> Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3. ⁵¹	Nonpriority creditor's name and mailing address Johnson Controls Fire Protection Department CH10320 Palatine, IL, 60055	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Services	\$ 4,492.00
	Date or dates debt was incurred <u>03/2019</u> Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

Debtor Inspired Concepts, LLC
NameCase number (if known) 20-20034**Part 2: Additional Page****Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional NONPRIORITY creditors exist, do not fill out or submit this page.****Amount of claim**

3. ⁵²	Nonpriority creditor's name and mailing address JPNJ Enterprises, LLC 555 S. Mission St. Mount Pleasant, MI, 48858	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Other	\$ <u>103,616.00</u>
	Date or dates debt was incurred <u>09/2015</u> Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3. ⁵³	Nonpriority creditor's name and mailing address JW Shaw Electric 4893 Teddington Dr. West Bloomfield, MI, 48323	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Services	\$ <u>440.00</u>
	Date or dates debt was incurred <u>03/2019</u> Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3. ⁵⁴	Nonpriority creditor's name and mailing address Keystone Self Storage 3770 Tittabawassee Rd. Saginaw, MI, 48604	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Services	\$ <u>9.00</u>
	Date or dates debt was incurred <u>11/2019</u> Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3. ⁵⁵	Nonpriority creditor's name and mailing address KJ Endeavors, LLC 555 S. Mission St. Mount Pleasant, MI, 48858	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Other	\$ <u>1,409,525.00</u>
	Date or dates debt was incurred <u>01/2018</u> Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3. ⁵⁶	Nonpriority creditor's name and mailing address LaBelle Management, et al. 405 S. Mission St. Mount Pleasant, MI, 48858	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: Termination of lease damages	\$ <u>389,053.00</u>
	Date or dates debt was incurred <u>12/2019</u> Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

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Amount of claim

3. ⁵⁷	Nonpriority creditor's name and mailing address Lamar Advertising 5321 Corporate Blvd. Baton Rouge, LA, 70896	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	\$ <u>28,876.00</u>
	Date or dates debt was incurred <u>12/2018</u> Last 4 digits of account number _____	Basis for the claim: Advertising/Marketing Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3. ⁵⁸	Nonpriority creditor's name and mailing address Larry's Lock & Safe Service PO Box 60 Angola, IN, 46703	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ <u>278.00</u>
	Date or dates debt was incurred <u>03/2019</u> Last 4 digits of account number _____	Basis for the claim: Services Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3. ⁵⁹	Nonpriority creditor's name and mailing address Legendary Restaurant Brands 5151 Beltline Rd. Suite 300 Dallas, TX, 75254	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	\$ <u>150,938.00</u>
	Date or dates debt was incurred <u>04/2019</u> Last 4 digits of account number _____	Basis for the claim: Franchise Obligations Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3. ⁶⁰	Nonpriority creditor's name and mailing address Mahoney Environmental 37458 Eagle Way Chicago, IL, 60678	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ <u>645.00</u>
	Date or dates debt was incurred <u>12/2019</u> Last 4 digits of account number _____	Basis for the claim: Services Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3. ⁶¹	Nonpriority creditor's name and mailing address Master Draftsman PO Box 358 Pottersville, MI, 48876	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ <u>192.00</u>
	Date or dates debt was incurred <u>12/2019</u> Last 4 digits of account number _____	Basis for the claim: Services Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

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Amount of claim

3. ⁶²	Nonpriority creditor's name and mailing address Matheson Law Firm 200 Woodland Pass Suite F East Lansing, MI, 48823	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Legal Services	\$ <u>13,569.00</u>
	Date or dates debt was incurred <u>09/2019</u> Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3. ⁶³	Nonpriority creditor's name and mailing address McDonald Hopkins PLC 39533 Woodward Ave. Suite 318 Bloomfield Hills, MI, 48304	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Legal Services	\$ <u>87,128.00</u>
	Date or dates debt was incurred <u>03/2019</u> Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3. ⁶⁴	Nonpriority creditor's name and mailing address Medler Electric 2155 Redman Dr. Alma, MI, 48801	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Services	\$ <u>149.00</u>
	Date or dates debt was incurred <u>10/2019</u> Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3. ⁶⁵	Nonpriority creditor's name and mailing address MG Outdoor Services PO Box 5793 Saginaw, MI, 48603	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: Advertising/Marketing	\$ <u>2,100.00</u>
	Date or dates debt was incurred <u>02/2019</u> Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3. ⁶⁶	Nonpriority creditor's name and mailing address Michigan Gas Utilities PO Box 3140 Milwaukee, WI, 53201	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Utility Services	\$ <u>2,220.00</u>
	Date or dates debt was incurred <u>07/2019</u> Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

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Amount of claim

3. ⁶⁷	Nonpriority creditor's name and mailing address Mission Impossible Printing PO Box 358 Fowlerville, MI, 48836	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ 530.00
	Basis for the claim: Services		
	Date or dates debt was incurred <u>10/2019</u>	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
	Last 4 digits of account number _____		
3. ⁶⁸	Nonpriority creditor's name and mailing address Modernistic 4310 S. Creyts Lansing, MI, 48917	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ 1,416.00
	Basis for the claim: Services		
	Date or dates debt was incurred <u>05/2019</u>	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
	Last 4 digits of account number _____		
3. ⁶⁹	Nonpriority creditor's name and mailing address Mood Media 2100 S IH-35 Frontage Rd. Suite 200 Austin, TX, 78704	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ 5.00
	Basis for the claim: Services		
	Date or dates debt was incurred <u>09/2019</u>	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
	Last 4 digits of account number _____		
3. ⁷⁰	Nonpriority creditor's name and mailing address Mr. Electric of Central Michigan PO Box 219 Mount Pleasant, MI, 48804	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ 276.00
	Basis for the claim: Services		
	Date or dates debt was incurred <u>10/2019</u>	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
	Last 4 digits of account number _____		
3. ⁷¹	Nonpriority creditor's name and mailing address Murray Shaver 518 Laughton Drive Midland, MI, 48640	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	\$ 500.00
	Basis for the claim: Services		
	Date or dates debt was incurred <u>12/2019</u>	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
	Last 4 digits of account number _____		

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Amount of claim

3. ⁷² Nonpriority creditor's name and mailing address NCR Corporation 3095 Satellite Blvd. Building 800, 3rd Floor Duluth, GA, 30096	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Services	\$ 220.00
Date or dates debt was incurred <u>12/2019</u> Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3. ⁷³ Nonpriority creditor's name and mailing address Nelbud 51 Kowebe Lane Indianapolis, IN, 46201	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Services	\$ 3,007.00
Date or dates debt was incurred <u>05/2019</u> Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3. ⁷⁴ Nonpriority creditor's name and mailing address Northern Refrigeration 3310 Mills Rd. Prescott, MI, 48756	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Services	\$ 1,227.00
Date or dates debt was incurred <u>03/2019</u> Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3. ⁷⁵ Nonpriority creditor's name and mailing address NUC02 PO Box 9011 Stuart, FL, 34995	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Suppliers or Vendors	\$ 1,033.00
Date or dates debt was incurred <u>11/2019</u> Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3. ⁷⁶ Nonpriority creditor's name and mailing address Outfront Media 185 US Highway 46 Fairfield, NJ, 07004	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: Services	\$ 6,000.00
Date or dates debt was incurred <u>10/2019</u> Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

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Amount of claim

<p>3. ⁷⁷ Nonpriority creditor's name and mailing address</p> <p>Pitney Bowes PO Box 371887 Pittsburgh, PA, 15250</p> <p>Date or dates debt was incurred <u>12/2019</u></p> <p>Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Services</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>\$ <u>348.00</u></p>
<p>3. ⁷⁸ Nonpriority creditor's name and mailing address</p> <p>Playnetwork PO Box 21550 New York, NY, 10087</p> <p>Date or dates debt was incurred <u>09/2016</u></p> <p>Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Services</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>\$ <u>693.00</u></p>
<p>3. ⁷⁹ Nonpriority creditor's name and mailing address</p> <p>Pleasant Graphics 6835 Lea-Pick Dr. Mount Pleasant, MI, 48858</p> <p>Date or dates debt was incurred <u>02/2018</u></p> <p>Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed</p> <p>Basis for the claim: Services</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>\$ <u>1,946.00</u></p>
<p>3. ⁸⁰ Nonpriority creditor's name and mailing address</p> <p>Premier Paper & Supplies 3417 Roger B Chaffee Dr., SE Suite 307 Grand Rapids, MI, 49548</p> <p>Date or dates debt was incurred <u>07/2019</u></p> <p>Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Suppliers or Vendors</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>\$ <u>73.00</u></p>
<p>3. ⁸¹ Nonpriority creditor's name and mailing address</p> <p>Priority Health 1231 E. Beltline NE Grand Rapids, MI, 49525</p> <p>Date or dates debt was incurred <u>12/2019</u></p> <p>Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim:</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>\$ <u>18,431.00</u></p>

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Amount of claim

3. ⁸²	Nonpriority creditor's name and mailing address Proforma PO Box 640814 Cincinnati, OH, 45264	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ 128.00
	Basis for the claim: Services		
	Date or dates debt was incurred <u>10/2019</u>	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
	Last 4 digits of account number _____		
3. ⁸³	Nonpriority creditor's name and mailing address Quality Acquisitions, LLC PO Box 2470 Portage, MI, 49081	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ 19,083.00
	Basis for the claim: Services		
	Date or dates debt was incurred <u>09/2019</u>	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
	Last 4 digits of account number _____		
3. ⁸⁴	Nonpriority creditor's name and mailing address R&M Services 387 E. Fenn Rd. Coldwater, MI, 49036	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ 343.00
	Basis for the claim: Services		
	Date or dates debt was incurred <u>02/2019</u>	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
	Last 4 digits of account number _____		
3. ⁸⁵	Nonpriority creditor's name and mailing address R&M Snow Removal 1060 W. Hibbard Rd. Owosso, MI, 48867	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ 840.00
	Basis for the claim: Services		
	Date or dates debt was incurred <u>01/2019</u>	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
	Last 4 digits of account number _____		
3. ⁸⁶	Nonpriority creditor's name and mailing address Red Book Solutions 4550 S. Windemere St. Englewood, CO, 80110	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	\$ 299.00
	Basis for the claim:		
	Date or dates debt was incurred _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
	Last 4 digits of account number _____		

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Amount of claim

3. ⁸⁷	Nonpriority creditor's name and mailing address Rooftop Solutions 2019 Corporate Lane Suite 119 Naperville, IL, 60563	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ 181.00
	Date or dates debt was incurred <u>10/2019</u> Last 4 digits of account number _____	Basis for the claim: Services Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3. ⁸⁸	Nonpriority creditor's name and mailing address Rose Pest Control PO Box 309 Troy, MI, 48099	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ 1,244.00
	Date or dates debt was incurred <u>10/2019</u> Last 4 digits of account number _____	Basis for the claim: Services Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3. ⁸⁹	Nonpriority creditor's name and mailing address SAFE Security 2440 Camino Ramon, #200 San Ramon, CA, 94583	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	\$ 120.00
	Date or dates debt was incurred <u>11/2019</u> Last 4 digits of account number _____	Basis for the claim: Services Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3. ⁹⁰	Nonpriority creditor's name and mailing address Sequin Lawn 2175 W. Linwood Rd. Linwood, MI, 48634	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ 2,124.00
	Date or dates debt was incurred <u>08/2019</u> Last 4 digits of account number _____	Basis for the claim: Services Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3. ⁹¹	Nonpriority creditor's name and mailing address Shoes for Crews 5000 T-Rex Avenue Suite 100 Boca Raton, FL, 33431	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ 1,549.00
	Date or dates debt was incurred <u>11/2019</u> Last 4 digits of account number _____	Basis for the claim: Services Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

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Amount of claim

3. ⁹² Nonpriority creditor's name and mailing addressSign Image
8155 Gratiot Ave.
Saginaw, MI, 48609

As of the petition filing date, the claim is:

Check all that apply.

- ☐
- Contingent
-
- ☐
- Unliquidated
-
- ☐
- Disputed

\$ 1,248.00

Basis for the claim: Services

Date or dates debt was incurred

08/2018

Last 4 digits of account number

Is the claim subject to offset?

- ☒
- No
-
- ☐
- Yes

3. ⁹³ Nonpriority creditor's name and mailing addressSigns by Crannie/Yesco
4145 Market Place
Flint, MI, 48507

As of the petition filing date, the claim is:

Check all that apply.

- ☐
- Contingent
-
- ☒
- Unliquidated
-
- ☒
- Disputed

\$ 300.00

Basis for the claim: Services

Date or dates debt was incurred

09/2019

Last 4 digits of account number

Is the claim subject to offset?

- ☒
- No
-
- ☐
- Yes

3. ⁹⁴ Nonpriority creditor's name and mailing addressSohn
PO Box 22158
Lansing, MI, 48909

As of the petition filing date, the claim is:

Check all that apply.

- ☐
- Contingent
-
- ☐
- Unliquidated
-
- ☐
- Disputed

\$ 3,624.00

Basis for the claim: Suppliers or Vendors

Date or dates debt was incurred

11/2019

Last 4 digits of account number

Is the claim subject to offset?

- ☒
- No
-
- ☐
- Yes

3. ⁹⁵ Nonpriority creditor's name and mailing addressSquare Toast Technologies, Inc.
5352 King James Way
Madison, WI, 53719

As of the petition filing date, the claim is:

Check all that apply.

- ☐
- Contingent
-
- ☐
- Unliquidated
-
- ☐
- Disputed

\$ 3,443.00

Basis for the claim: Services

Date or dates debt was incurred

Last 4 digits of account number

Is the claim subject to offset?

- ☒
- No
-
- ☐
- Yes

3. ⁹⁶ Nonpriority creditor's name and mailing addressStill Cooking Repair, LLC
5131 E. Ward St.
Mount Pleasant, MI, 48858

As of the petition filing date, the claim is:

Check all that apply.

- ☐
- Contingent
-
- ☐
- Unliquidated
-
- ☐
- Disputed

\$ 541.00

Basis for the claim: Services

Date or dates debt was incurred

11/2019

Last 4 digits of account number

Is the claim subject to offset?

- ☒
- No
-
- ☐
- Yes

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Amount of claim

3. ⁹⁷ Nonpriority creditor's name and mailing addressStuart Frankel Development
1334 Maplelawn
Troy, MI, 48084

As of the petition filing date, the claim is:

Check all that apply.

- ☐
- Contingent
-
- ☐
- Unliquidated
-
- ☐
- Disputed

\$ 5,340.00

Basis for the claim: Lease obligations

Is the claim subject to offset?

- ☒
- No
-
- ☐
- Yes

Date or dates debt was incurred

12/2019

Last 4 digits of account number

3. ⁹⁸ Nonpriority creditor's name and mailing addressSummit Companies
PO Box 6205
Carol Stream, IL, 60197

As of the petition filing date, the claim is:

Check all that apply.

- ☐
- Contingent
-
- ☐
- Unliquidated
-
- ☐
- Disputed

\$ 1,106.00

Basis for the claim: Services

Is the claim subject to offset?

- ☒
- No
-
- ☐
- Yes

Date or dates debt was incurred

11/2019

Last 4 digits of account number

3. ⁹⁹ Nonpriority creditor's name and mailing addressTaylor Freeze of Michigan, Inc.
211 Walker Ct.
Grand Rapids, MI, 49544

As of the petition filing date, the claim is:

Check all that apply.

- ☐
- Contingent
-
- ☐
- Unliquidated
-
- ☐
- Disputed

\$ 1,145.00

Basis for the claim: Services

Is the claim subject to offset?

- ☒
- No
-
- ☐
- Yes

Date or dates debt was incurred

12/2019

Last 4 digits of account number

3. ¹⁰⁰ Nonpriority creditor's name and mailing addressTeachout Security Solutions
G-2348 Stone Bridge Dr.
Building H
Flint, MI, 48532

As of the petition filing date, the claim is:

Check all that apply.

- ☐
- Contingent
-
- ☐
- Unliquidated
-
- ☐
- Disputed

\$ 875.00

Basis for the claim: Services

Is the claim subject to offset?

- ☒
- No
-
- ☐
- Yes

Date or dates debt was incurred

03/2019

Last 4 digits of account number

3. ¹⁰¹ Nonpriority creditor's name and mailing addressTerminix
150 Peabody Place
Memphis, TN, 38103

As of the petition filing date, the claim is:

Check all that apply.

- ☐
- Contingent
-
- ☐
- Unliquidated
-
- ☐
- Disputed

\$ 122.00

Basis for the claim: Services

Is the claim subject to offset?

- ☒
- No
-
- ☐
- Yes

Date or dates debt was incurred

11/2019

Last 4 digits of account number

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Amount of claim

3. ¹⁰²	Nonpriority creditor's name and mailing address The 'Ville 16435 Franklin South Monroe, MI, 48168	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	\$ <u>533.00</u>
	Date or dates debt was incurred <u>05/2018</u> Last 4 digits of account number _____	Basis for the claim: Services Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3. ¹⁰³	Nonpriority creditor's name and mailing address The Key Shop 1804 W. Wackerly St. Midland, MI, 48640	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ <u>124.00</u>
	Date or dates debt was incurred <u>12/2019</u> Last 4 digits of account number _____	Basis for the claim: Services Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3. ¹⁰⁴	Nonpriority creditor's name and mailing address The TM Group 27555 Executive Dr. Suite 100 Farmington, MI, 48331	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ <u>1,702.00</u>
	Date or dates debt was incurred <u>01/2019</u> Last 4 digits of account number _____	Basis for the claim: Software/Operating Systems Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3. ¹⁰⁵	Nonpriority creditor's name and mailing address The Tuna Group 956 Northlawn Blvd. Birmingham, MI, 48009	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ <u>75.00</u>
	Date or dates debt was incurred <u>01/2020</u> Last 4 digits of account number _____	Basis for the claim: Services Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3. ¹⁰⁶	Nonpriority creditor's name and mailing address Toaster Connection International 5 South Lewis St. Metter, GA, 30439	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ <u>179.00</u>
	Date or dates debt was incurred <u>11/2019</u> Last 4 digits of account number _____	Basis for the claim: Services Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

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Amount of claim

3. ¹⁰⁷ Nonpriority creditor's name and mailing address Total-Lee Sports 1575 S. Airway Dr. Mount Pleasant, MI, 48858	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Services	\$ 326.00
Date or dates debt was incurred <u>10/2019</u> Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3. ¹⁰⁸ Nonpriority creditor's name and mailing address Tri-State Carpet PO Box 658 Angola, IN, 46703	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Services	\$ 195.00
Date or dates debt was incurred <u>03/2019</u> Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3. ¹⁰⁹ Nonpriority creditor's name and mailing address Trouble Shooters of Mid-Michigan 1565 Airway Drive Mount Pleasant, MI, 48858	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Services	\$ 4,742.00
Date or dates debt was incurred <u>10/2019</u> Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3. ¹¹⁰ Nonpriority creditor's name and mailing address Ultimate Landscaping 4283 N. Autumn Ridge Dr. Saginaw, MI, 48603	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Services	\$ 465.00
Date or dates debt was incurred <u>02/2019</u> Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3. ¹¹¹ Nonpriority creditor's name and mailing address USA Paper and Ribbon 21270 W. 8 Mile Rd. Southfield, MI, 48075	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Suppliers or Vendors	\$ 496.00
Date or dates debt was incurred <u>12/2019</u> Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

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Amount of claim

3. ¹¹²	Nonpriority creditor's name and mailing address Vanguard Fire and Security Systems PO Box 9218 Grand Rapids, MI, 49509	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ <u>936.00</u>
	Date or dates debt was incurred <u>12/2019</u> Last 4 digits of account number _____	Basis for the claim: Services Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3. ¹¹³	Nonpriority creditor's name and mailing address Veterans Alarm 5100 Bay City Rd. Midland, MI, 48642	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ <u>335.00</u>
	Date or dates debt was incurred <u>07/2019</u> Last 4 digits of account number _____	Basis for the claim: Services Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3. ¹¹⁴	Nonpriority creditor's name and mailing address Wasserstrom Company PO Box 182056 Columbus, OH, 43218	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ <u>1,181.00</u>
	Date or dates debt was incurred <u>11/2019</u> Last 4 digits of account number _____	Basis for the claim: Services Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3. ¹¹⁵	Nonpriority creditor's name and mailing address Waste Management of Michigan PO Box 4648 Carol Stream, IL, 60197	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ <u>516.00</u>
	Date or dates debt was incurred <u>12/2019</u> Last 4 digits of account number _____	Basis for the claim: Services Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3. ¹¹⁶	Nonpriority creditor's name and mailing address WEX Bank PO Box 6239 Carol Stream, IL, 60197	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ <u>2,584.00</u>
	Date or dates debt was incurred <u>01/2020</u> Last 4 digits of account number _____	Basis for the claim: Credit Card Debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

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Amount of claim

<p>3. ¹¹⁷ Nonpriority creditor's name and mailing address</p> <p>Wolverine Signs 923 Bradley Owosso, MI, 48867</p> <p>Date or dates debt was incurred <u>03/2019</u></p> <p>Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed</p> <p>Basis for the claim: Services</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>\$ <u>1,174.00</u></p>
<p>3. Nonpriority creditor's name and mailing address</p> <p>Date or dates debt was incurred _____</p> <p>Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim:</p> <p>Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>\$ _____</p>
<p>3. Nonpriority creditor's name and mailing address</p> <p>Date or dates debt was incurred _____</p> <p>Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim:</p> <p>Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>\$ _____</p>
<p>3. Nonpriority creditor's name and mailing address</p> <p>Date or dates debt was incurred _____</p> <p>Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim:</p> <p>Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>\$ _____</p>
<p>3. Nonpriority creditor's name and mailing address</p> <p>Date or dates debt was incurred _____</p> <p>Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim:</p> <p>Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>\$ _____</p>

Part 3: List Others to Be Notified About Unsecured Claims

4. List in alphabetical order any others who must be notified for claims listed in Parts 1 and 2. Examples of entities that may be listed are collection agencies, assignees of claims listed above, and attorneys for unsecured creditors.

If no others need to be notified for the debts listed in Parts 1 and 2, do not fill out or submit this page. If additional pages are needed, copy the next page.

	Name and mailing address	On which line in Part 1 or Part 2 is the related creditor (if any) listed?	Last 4 digits of account number, if any
4.1.	Richard O. Milster, Esq. 240 W. Main St. Suite 1000 Midland, MI, 48640	Line <u>3.56</u> <input type="checkbox"/> Not listed. Explain: _____	_____
4.2.	_____	Line _____ <input type="checkbox"/> Not listed. Explain _____	_____
4.3.	_____	Line _____ <input type="checkbox"/> Not listed. Explain _____	_____
4.4.	_____	Line _____ <input type="checkbox"/> Not listed. Explain _____	_____
4.1.	_____	Line _____ <input type="checkbox"/> Not listed. Explain _____	_____
4.5.	_____	Line _____ <input type="checkbox"/> Not listed. Explain _____	_____
4.6.	_____	Line _____ <input type="checkbox"/> Not listed. Explain _____	_____
4.7.	_____	Line _____ <input type="checkbox"/> Not listed. Explain _____	_____
4.8.	_____	Line _____ <input type="checkbox"/> Not listed. Explain _____	_____
4.9.	_____	Line _____ <input type="checkbox"/> Not listed. Explain _____	_____
4.10.	_____	Line _____ <input type="checkbox"/> Not listed. Explain _____	_____
4.11.	_____	Line _____ <input type="checkbox"/> Not listed. Explain _____	_____

Part 4: Total Amounts of the Priority and Nonpriority Unsecured Claims

5. Add the amounts of priority and nonpriority unsecured claims.

Total of claim amounts

5a. Total claims from Part 1	5a.	\$ 618,565.00
5b. Total claims from Part 2	5b. +	\$ 3,561,891.00
5c. Total of Parts 1 and 2 Lines 5a + 5b = 5c.	5c.	\$ 4,180,456.00

Fill in this information to identify the case:

Debtor name Inspired Concepts, LLC

United States Bankruptcy Court for the: Eastern District of Michigan

Case number (If known): 20-20034 Chapter 11

☒ Check if this is an amended filing

Official Form 206G**Schedule G: Executory Contracts and Unexpired Leases**

12/15

Be as complete and accurate as possible. If more space is needed, copy and attach the additional page, numbering the entries consecutively.

1. Does the debtor have any executory contracts or unexpired leases?

- ☐ No. Check this box and file this form with the court with the debtor's other schedules. There is nothing else to report on this form.
- ☒ Yes. Fill in all of the information below even if the contracts or leases are listed on *Schedule A/B: Assets - Real and Personal Property* (Official Form 206A/B).

2. List all contracts and unexpired leases

State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

2.1	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Real Property lease, Pixie Restaurant, Mt. Pleasant, MI Lessee</p> <p>State the term remaining</p> <p>September 30, 2024</p> <p>List the contract number of any government contract</p>	<p>LaBelle Limited Partnership 405 S. Mission St. Mount Pleasant, MI, 48858</p>
2.2	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Real Property Lease, Big Apple Bagel, Midland, MI Lessee</p> <p>State the term remaining</p> <p>List the contract number of any government contract</p>	<p>Mart Modern Plaza LLC 908 Meadowbrook Midland, MI, 48640</p>
2.3	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Real Property Lease, Bennigan's, Mt. Pleasant, MI Lessee</p> <p>State the term remaining</p> <p>September 30, 2024</p> <p>List the contract number of any government contract</p>	<p>Labelle Limited Partnership 405 S. Mission St. Mount Pleasant, MI, 48858</p>
2.4	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Real Property lease, Ponderosa, Mt. Pleasant, MI Lessee</p> <p>State the term remaining</p> <p>September 30, 2024</p> <p>List the contract number of any government contract</p>	<p>Hospitality Holdings, LLC 405 S. Mission St. Mount Pleasant, MI, 48858</p>
2.5	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Real Property lease, Italian Oven, Mt. Pleasant, MI Lessee</p> <p>State the term remaining</p> <p>September 30, 2024</p> <p>List the contract number of any government contract</p>	<p>LaBelle Limited Partnership 405 S. Mission St. Mount Pleasant, MI, 48858</p>

Debtor Inspired Concepts, LLC
Name

Case number (if known) 20-20034

Additional Page if Debtor Has More Executory Contracts or Unexpired Leases

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page.

List all contracts and unexpired leases		State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
2.6	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Real Property Lease, Smashburger, West Bloomfield, MI Lessee</p> <p>State the term remaining</p> <p>January 31, 2022 (est.)</p> <p>List the contract number of any government contract</p>	<p>The Shopping Boardwalk in West Bloomfield, LLC 31731 Northwestern Hwy., Suite 250W Fenwick, MI, 48834</p>
2.7	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Real Property Lease, Smashburger, Troy, MI Lessee</p> <p>State the term remaining</p> <p>November 30, 2022</p> <p>List the contract number of any government contract</p>	<p>Troy Sports Center Properties, LLC 1819 E. Big Beaver Rd. Troy, MI, 48083</p>
2.8	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Real Property lease, Smashburger, Rochester Hills, MI Lessee</p> <p>State the term remaining</p> <p>June 30, 2026 (est.)</p> <p>List the contract number of any government contract</p>	<p>Campus Corners Associates Limited Partnership 1334 Maplelawn Troy, MI, 48084</p>
2.9	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Real Estate lease, Noodles & Co., Midland, MI Lessee</p> <p>State the term remaining</p> <p>June 30, 2036</p> <p>List the contract number of any government contract</p>	<p>D3 Midland LLC 3841 Greenhills Village, Suite 400 Nashville, TN, 37215</p>
2.10	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Equipment Lease: Deli Cases Lessee</p> <p>State the term remaining</p> <p>October 5, 2020</p> <p>List the contract number of any government contract</p>	<p>CharBhan Holdings, LLC 555 S. Mission St. Mount Pleasant, MI, 48858</p>
2.11	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Equipment Lease: Espresso Machine and related items Lessee</p> <p>State the term remaining</p> <p>June 30, 2022</p> <p>List the contract number of any government contract</p>	<p>CharBhan Holdings, LLC 555 S. Mission St. Mount Pleasant, MI, 48858</p>
2.12	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Equipment Lease: Refrigeration equipment Lessee</p> <p>State the term remaining</p> <p>April 6, 2020</p> <p>List the contract number of any government contract</p>	<p>CharBhan Holdings, LLC 555 S. Mission St. Mount Pleasant, MI, 48858</p>

Debtor Inspired Concepts, LLC
Name

Case number (if known) 20-20034

Additional Page if Debtor Has More Executory Contracts or Unexpired Leases

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page.

List all contracts and unexpired leases		State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
2.13	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Real Property lease, Cracked Restaurant, Northville, MI Lessee</p> <p>December 31, 2022 (est.)</p> <p>State the term remaining</p> <p>List the contract number of any government contract</p>	<p>Northville Retail Center Phase2, LLC c/o Grand Sakwa Management 28470 13 Mile Rd. Farmington, MI, 48334</p>
2.14	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Real Property lease, Noodles & Co., Mt. Pleasant, MI Lessee</p> <p>June 30, 2032</p> <p>State the term remaining</p> <p>List the contract number of any government contract</p>	<p>MP Note LLC 200 W. Michigan Ave., Suite 201 Kalamazoo, MI, 49007</p>
2.15	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Real Property lease for Big Apple Bagel, Mt. Pleasant, MI Lessee</p> <p>December 31, 2025 (est.)</p> <p>State the term remaining</p> <p>List the contract number of any government contract</p>	<p>LaBelle Limited Partnership 405 S. Mission St. Mount Pleasant, MI, 48858</p>
2.16	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Lease of Pitney Bowes postage meter Lessee</p> <p>June 30, 2022</p> <p>State the term remaining</p> <p>List the contract number of any government contract</p>	<p>Pitney Bowes</p>
2.17	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Lease of Office Copier Lessee</p> <p>unknown</p> <p>State the term remaining</p> <p>List the contract number of any government contract</p>	<p>Polak Corporation 1400 Keystone Lansing, MI, 48911</p>
2.____	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>State the term remaining</p> <p>List the contract number of any government contract</p>	
2.____	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>State the term remaining</p> <p>List the contract number of any government contract</p>	

Fill in this information to identify the case and this filing:

Debtor Name Inspired Concepts, LLC

United States Bankruptcy Court for the: Eastern District of Michigan

Case number (If known): 20-20034

Official Form 202**Declaration Under Penalty of Perjury for Non-Individual Debtors**

12/15

An individual who is authorized to act on behalf of a non-individual debtor, such as a corporation or partnership, must sign and submit this form for the schedules of assets and liabilities, any other document that requires a declaration that is not included in the document, and any amendments of those documents. This form must state the individual's position or relationship to the debtor, the identity of the document, and the date. Bankruptcy Rules 1008 and 9011.

WARNING -- Bankruptcy fraud is a serious crime. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$500,000 or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Declaration and signature

I am the president, another officer, or an authorized agent of the corporation; a member or an authorized agent of the partnership; or another individual serving as a representative of the debtor in this case.

I have examined the information in the documents checked below and I have a reasonable belief that the information is true and correct:

- ☒ *Schedule A/B: Assets—Real and Personal Property* (Official Form 206A/B)
- ☒ *Schedule D: Creditors Who Have Claims Secured by Property* (Official Form 206D)
- ☒ *Schedule E/F: Creditors Who Have Unsecured Claims* (Official Form 206E/F)
- ☒ *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 206G)
- ☐ *Schedule H: Codebtors* (Official Form 206H)
- ☐ *Summary of Assets and Liabilities for Non-Individuals* (Official Form 206Sum)
- ☐ Amended Schedule _____
- ☐ *Chapter 11 or Chapter 9 Cases: List of Creditors Who Have the 20 Largest Unsecured Claims and Are Not Insiders* (Official Form 204)
- ☐ Other document that requires a declaration _____

I declare under penalty of perjury that the foregoing is true and correct.

Executed on 05/12/2020
MM / DD / YYYY

X /s/ Jeff Neely

Signature of individual signing on behalf of debtor

Jeff Neely

Printed name

Member

Position or relationship to debtor

Fill in this information to identify the case:

Debtor name Inspired Concepts, LLC

United States Bankruptcy Court for the: Eastern District of Michigan

Case number (if known): 20-20034

☒ Check if this is an amended filing

Official Form 207**Statement of Financial Affairs for Non-Individuals Filing for Bankruptcy****04/19**

The debtor must answer every question. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write the debtor's name and case number (if known).

Part 1: Income**1. Gross revenue from business**

☐ None

Identify the beginning and ending dates of the debtor's fiscal year, which may be a calendar year

Sources of revenue
Check all that apply

Gross revenue
(before deductions and exclusions)

From the beginning of the fiscal year to filing date:

From 01/01/2020 to Filing date
MM / DD / YYYY

☒ Operating a business
☐ Other

\$ 3,550,563.00

For prior year:

From 01/01/2019 to 12/31/2019
MM / DD / YYYY

☒ Operating a business
☐ Other

\$ 17,026,937.00

For the year before that:

From 01/01/2018 to 12/31/2018
MM / DD / YYYY

☒ Operating a business
☐ Other

\$ 24,115,503.00

2. Non-business revenue

Include revenue regardless of whether that revenue is taxable. *Non-business income* may include interest, dividends, money collected from lawsuits, and royalties. List each source and the gross revenue for each separately. Do not include revenue listed in line 1.

☐ None

Description of sources of revenue

Gross revenue from each source
(before deductions and exclusions)

From the beginning of the fiscal year to filing date:

From 01/01/2020 to Filing date
MM / DD / YYYY

\$ 0.00

For prior year:

From 01/01/2019 to 12/31/2019
MM / DD / YYYY

\$ 0.00

For the year before that:

From 01/01/2018 to 12/31/2018
MM / DD / YYYY

\$ 0.00

Debtor Inspired Concepts, LLC
Name

Case number (if known) 20-20034

Part 2: List Certain Transfers Made Before Filing for Bankruptcy

3. Certain payments or transfers to creditors within 90 days before filing this case

List payments or transfers—including expense reimbursements—to any creditor, other than regular employee compensation, within 90 days before filing this case unless the aggregate value of all property transferred to that creditor is less than \$6,825. (This amount may be adjusted on 4/01/22 and every 3 years after that with respect to cases filed on or after the date of adjustment.)

☐ None

Creditor's name and address	Dates	Total amount or value	Reasons for payment or transfer <i>Check all that apply</i>
3.1. <u>See Attached SOFA Part 2, Question 3</u> Creditor's name		\$ <u>2,166,177.00</u>	<input type="checkbox"/> Secured debt <input type="checkbox"/> Unsecured loan repayments <input type="checkbox"/> Suppliers or vendors <input type="checkbox"/> Services <input type="checkbox"/> Other _____
3.2. _____ Creditor's name		\$ _____	<input type="checkbox"/> Secured debt <input type="checkbox"/> Unsecured loan repayments <input type="checkbox"/> Suppliers or vendors <input type="checkbox"/> Services <input type="checkbox"/> Other _____

4. Payments or other transfers of property made within 1 year before filing this case that benefited any insider

List payments or transfers, including expense reimbursements, made within 1 year before filing this case on debts owed to an insider or guaranteed or cosigned by an insider unless the aggregate value of all property transferred to or for the benefit of the insider is less than \$6,825. (This amount may be adjusted on 4/01/22 and every 3 years after that with respect to cases filed on or after the date of adjustment.) Do not include any payments listed in line 3. *Insiders* include officers, directors, and anyone in control of a corporate debtor and their relatives; general partners of a partnership debtor and their relatives; affiliates of the debtor and insiders of such affiliates; and any managing agent of the debtor. 11 U.S.C. § 101(31).

☐ None

Insider's name and address	Dates	Total amount or value	Reasons for payment or transfer
4.1. <u>Natash Neely</u> Insider's name <u>555 S. Mission St.</u> <u>Mt. Pleasant, MI 48858</u>		\$ <u>78,491.97</u>	Wages and benefits for services provided
Relationship to debtor <u>Daughter of Members</u>			
4.2. <u>CharBhan Holdings, LLC</u> Insider's name <u>555 S. Mission St.</u> <u>Mt. Pleasant, MI 48858</u>		\$ <u>80,260.00</u>	Periodic and regular lease and rent payments
Relationship to debtor <u>Affiliate</u>			

Custodian's name and address	Description of the property	Value
_____	_____	\$ _____
Custodian's name	Case title	Court name and address
	_____	_____
	Case number	Name _____

	Date of order or assignment	

Part 4: Certain Gifts and Charitable Contributions

9. List all gifts or charitable contributions the debtor gave to a recipient within 2 years before filing this case unless the aggregate value of the gifts to that recipient is less than \$1,000

None

	Recipient's name and address	Description of the gifts or contributions	Dates given	Value
9.1.	<div>See Attached SOFA Part 4, Question 9</div> <div>Recipient's name</div>			\$ 4,233.00
	<div>Recipient's relationship to debtor</div> <div></div>			
9.2.	<div></div> <div>Recipient's name</div>			\$
	<div>Recipient's relationship to debtor</div> <div></div>			

Part 5: Certain Losses

10. **All losses from fire, theft, or other casualty within 1 year before filing this case.**

 None

Description of the property lost and how the loss occurred	Amount of payments received for the loss If you have received payments to cover the loss, for example, from insurance, government compensation, or tort liability, list the total received. List unpaid claims on Official Form 106A/B (Schedule A/B: Assets – Real and Personal Property).	Date of loss	Value of property lost
Fire Damage: Italian Oven, Mt. Pleasant	27,199.00	08/04/2019	\$27,199.00

Debtor Inspired Concepts, LLC
Name

Case number (if known) 20-20034

Part 6: Certain Payments or Transfers

11. Payments related to bankruptcy

List any payments of money or other transfers of property made by the debtor or person acting on behalf of the debtor within 1 year before the filing of this case to another person or entity, including attorneys, that the debtor consulted about debt consolidation or restructuring, seeking bankruptcy relief, or filing a bankruptcy case.

☐ None

	Who was paid or who received the transfer?	If not money, describe any property transferred	Dates	Total amount or value
11.1.	Grasl PLC		01/06/2020	\$ 16,000.00
	Address			
	31800 Northwestern Hwy. Suite 350 Farmington, MI 48334			
	Email or website address			
	jeff@grasplc.com			
	Who made the payment, if not debtor?			

	Who was paid or who received the transfer?	If not money, describe any property transferred	Dates	Total amount or value
11.2.				\$
	Address			
	Email or website address			
	Who made the payment, if not debtor?			

12. Self-settled trusts of which the debtor is a beneficiary

List any payments or transfers of property made by the debtor or a person acting on behalf of the debtor within 10 years before the filing of this case to a self-settled trust or similar device.

Do not include transfers already listed on this statement.

☒ None

Name of trust or device	Describe any property transferred	Dates transfers were made	Total amount or value
			\$
Trustee			

Debtor Inspired Concepts, LLC
Name

Case number (if known) 20-20034

13. Transfers not already listed on this statement

List any transfers of money or other property—by sale, trade, or any other means—made by the debtor or a person acting on behalf of the debtor within 2 years before the filing of this case to another person, other than property transferred in the ordinary course of business or financial affairs. Include both outright transfers and transfers made as security. Do not include gifts or transfers previously listed on this statement.

☒ None

Who received transfer?	Description of property transferred or payments received or debts paid in exchange	Date transfer was made	Total amount or value
13.1. _____		_____	\$ _____
Address _____			
Relationship to debtor _____			
13.2. _____		_____	\$ _____
Address _____			
Relationship to debtor _____			

Part 7: Previous Locations

14. Previous addresses

List all previous addresses used by the debtor within 3 years before filing this case and the dates the addresses were used.

☒ Does not apply

Address	Dates of occupancy	
	From	To
14.1. _____	_____	_____
14.2. _____	_____	_____

Debtor Inspired Concepts, LLC
Name

Case number (if known) 20-20034

Part 8: Health Care Bankruptcies

15. Health Care bankruptcies

Is the debtor primarily engaged in offering services and facilities for:

- diagnosing or treating injury, deformity, or disease, or
- providing any surgical, psychiatric, drug treatment, or obstetric care?

- ☒ No. Go to Part 9.
☐ Yes. Fill in the information below.

Facility name and address

Nature of the business operation, including type of services the debtor provides

If debtor provides meals and housing, number of patients in debtor's care

15.1.

Facility name

Location where patient records are maintained (if different from facility address). If electronic, identify any service provider.

How are records kept?

Check all that apply:

- ☐ Electronically
☐ Paper

Facility name and address

Nature of the business operation, including type of services the debtor provides

If debtor provides meals and housing, number of patients in debtor's care

15.2.

Facility name

Location where patient records are maintained (if different from facility address). If electronic, identify any service provider.

How are records kept?

Check all that apply:

- ☐ Electronically
☐ Paper

Part 9: Personally Identifiable Information

16. Does the debtor collect and retain personally identifiable information of customers?

- ☒ No.
☐ Yes. State the nature of the information collected and retained. _____

Does the debtor have a privacy policy about that information?

- ☐ No
☐ Yes

17. Within 6 years before filing this case, have any employees of the debtor been participants in any ERISA, 401(k), 403(b), or other pension or profit-sharing plan made available by the debtor as an employee benefit?

- ☐ No. Go to Part 10.
 Yes. Does the debtor serve as plan administrator?

☐ No. Go to Part 10.

☒ Yes. Fill in below:

Name of plan

Employer identification number of the plan

Inspired Concepts LLC 401(k) Profit Sharing Plan

EIN: 46-4401178

Has the plan been terminated?

- ☒ No
☐ Yes

Debtor Inspired Concepts, LLC Case number (if known) 20-20034
 Name _____

Part 10: Certain Financial Accounts, Safe Deposit Boxes, and Storage Units
18. Closed financial accounts

Within 1 year before filing this case, were any financial accounts or instruments held in the debtor's name, or for the debtor's benefit, closed, sold, moved, or transferred?

Include checking, savings, money market, or other financial accounts; certificates of deposit; and shares in banks, credit unions, brokerage houses, cooperatives, associations, and other financial institutions.

☐ None

	Financial institution name and address	Last 4 digits of account number	Type of account	Date account was closed, sold, moved, or transferred	Last balance before closing or transfer
18.1.	<u>Fifth Third Bank (Closed)</u> Name _____	<u>XXXX-1855</u>	<input checked="" type="checkbox"/> Checking <input type="checkbox"/> Savings <input type="checkbox"/> Money market <input type="checkbox"/> Brokerage <input type="checkbox"/> Other _____	<u>08/28/2019</u>	\$ <u>0.00</u>
18.2.	_____ Name _____	<u>XXXX-</u> _____	<input type="checkbox"/> Checking <input type="checkbox"/> Savings <input type="checkbox"/> Money market <input type="checkbox"/> Brokerage <input type="checkbox"/> Other _____	_____	\$ _____

19. Safe deposit boxes

List any safe deposit box or other depository for securities, cash, or other valuables the debtor now has or did have within 1 year before filing this case.

☒ None

Depository institution name and address	Names of anyone with access to it	Description of the contents	Does debtor still have it?
_____ Name _____			<input type="checkbox"/> No <input type="checkbox"/> Yes
_____ Address _____			

20. Off-premises storage

List any property kept in storage units or warehouses within 1 year before filing this case. Do not include facilities that are in a part of a building in which the debtor does business.

☒ None

Facility name and address	Names of anyone with access to it	Description of the contents	Does debtor still have it?
_____ Name _____			<input type="checkbox"/> No <input type="checkbox"/> Yes
_____ Address _____			

Debtor Inspired Concepts, LLC
Name

Case number (if known) 20-20034

Part 11: Property the Debtor Holds or Controls That the Debtor Does Not Own

21. Property held for another

List any property that the debtor holds or controls that another entity owns. Include any property borrowed from, being stored for, or held in trust. Do not list leased or rented property.

☒ None

Owner's name and address	Location of the property	Description of the property	Value
 Name			\$ _____

Part 12: Details About Environmental Information

For the purpose of Part 12, the following definitions apply:

- *Environmental law* means any statute or governmental regulation that concerns pollution, contamination, or hazardous material, regardless of the medium affected (air, land, water, or any other medium).
- *Site* means any location, facility, or property, including disposal sites, that the debtor now owns, operates, or utilizes or that the debtor formerly owned, operated, or utilized.
- *Hazardous material* means anything that an environmental law defines as hazardous or toxic, or describes as a pollutant, contaminant, or a similarly harmful substance.

Report all notices, releases, and proceedings known, regardless of when they occurred.

22. Has the debtor been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders.

- ☒ No
☐ Yes. Provide details below.

Case title	Court or agency name and address	Nature of the case	Status of case
 Case number	 Name		<input type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded

23. Has any governmental unit otherwise notified the debtor that the debtor may be liable or potentially liable under or in violation of an environmental law?

- ☒ No
☐ Yes. Provide details below.

Site name and address	Governmental unit name and address	Environmental law, if known	Date of notice
 Name	 Name		

Debtor Inspired Concepts, LLC
Name

Case number (if known) 20-20034

24. Has the debtor notified any governmental unit of any release of hazardous material?

- ☒ No
☐ Yes. Provide details below.

Site name and address	Governmental unit name and address	Environmental law, if known	Date of notice
Name	Name		

Part 13: Details About the Debtor's Business or Connections to Any Business

25. Other businesses in which the debtor has or has had an interest

List any business for which the debtor was an owner, partner, member, or otherwise a person in control within 6 years before filing this case. Include this information even if already listed in the Schedules.

- ☒ None

25.1.	Business name and address Name	Describe the nature of the business	Employer Identification number Do not include Social Security number or ITIN. EIN: _____ Dates business existed From _____ To _____
25.2.	Business name and address Name	Describe the nature of the business	Employer Identification number Do not include Social Security number or ITIN. EIN: _____ Dates business existed From _____ To _____
25.3.	Business name and address Name	Describe the nature of the business	Employer Identification number Do not include Social Security number or ITIN. EIN: _____ Dates business existed From _____ To _____

Debtor Inspired Concepts, LLC
Name

Case number (if known) 20-20034

26. Books, records, and financial statements

26a. List all accountants and bookkeepers who maintained the debtor's books and records within 2 years before filing this case.

☐ None

Name and address	Dates of service
26a.1. <u>Carrie Hindmon, CPA</u> Name <u>4295 Okemos Rd., Suite 200, Okemos MI 48864</u>	From <u>01/01/2017</u> To <u>01/10/2020</u>

Name and address	Dates of service
26a.2. _____ Name	From _____ To _____

26b. List all firms or individuals who have audited, compiled, or reviewed debtor's books of account and records or prepared a financial statement within 2 years before filing this case.

☐ None

Name and address	Dates of service
26b.1. <u>Carrie Hindmon, CPA</u> Name <u>4295 Okemos Rd., Suite 200, Okemos MI 48864</u>	From <u>01/01/2017</u> To <u>01/10/2020</u>

Name and address	Dates of service
26b.2. _____ Name	From _____ To _____

26c. List all firms or individuals who were in possession of the debtor's books of account and records when this case is filed.

☐ None

Name and address	If any books of account and records are unavailable, explain why
26c.1. <u>Jeffrey Neely</u> Name <u>555 S. Mission St., Mt. Pleasant MI 48858</u>	

Name and address

If any books of account and records are unavailable, explain why

26c.2.

Name

26d. List all financial institutions, creditors, and other parties, including mercantile and trade agencies, to whom the debtor issued a financial statement within 2 years before filing this case.

☐ None

Name and address

26d.1.

Fifth Third Bank

Name

c/o Michael Messenger, Esq., 433 N. Summit, 9th Flr., Toledo OH 43604

Name and address

26d.2.

Mercantile Bank

Name

c/o Andrew Shier, Esq., 99 Monroe Ave. NW., Suite 1100, Grand Rapids MI 49503

27. Inventories

Have any inventories of the debtor's property been taken within 2 years before filing this case?

- ☒ No
- ☐ Yes. Give the details about the two most recent inventories.

Name of the person who supervised the taking of the inventory	Date of inventory	The dollar amount and basis (cost, market, or other basis) of each inventory
---	-------------------	--

\$

Name and address of the person who has possession of inventory records

27.1.

Name

Debtor Inspired Concepts, LLC
Name _____

Case number (if known) 20-20034

Name of the person who supervised the taking of the inventory

Date of
inventory

The dollar amount and basis (cost, market, or
other basis) of each inventory

\$ _____

Name and address of the person who has possession of inventory records

27.2.

Name _____

28. List the debtor's officers, directors, managing members, general partners, members in control, controlling shareholders, or other people in control of the debtor at the time of the filing of this case.

Name	Address	Position and nature of any interest	% of interest, if any
Jeffrey Neely	555 S. Mission St., Mount Pleasant, MI 48858	Member	50
Patti Neely	555 S. Mission St., Mount Pleasant, MI 48858	Member	50

29. Within 1 year before the filing of this case, did the debtor have officers, directors, managing members, general partners, members in control of the debtor, or shareholders in control of the debtor who no longer hold these positions?

☐ No

☐ Yes. Identify below.

Name	Address	Position and nature of any interest	Period during which position or interest was held
			_____ To _____
			_____ To _____
			_____ To _____
			_____ To _____

30. Payments, distributions, or withdrawals credited or given to insiders

Within 1 year before filing this case, did the debtor provide an insider with value in any form, including salary, other compensation, draws, bonuses, loans, credits on loans, stock redemptions, and options exercised?

☐ No

☒ Yes. Identify below.

Name and address of recipient	Amount of money or description and value of property	Dates	Reason for providing the value
30.1. Jeffrey and Patti Neely Name 555 S. Mission St. Mount Pleasant, MI 48858	184,940.00	_____ _____ _____	Distributions and payment of Health Benefits for period January 2019 - January 10, 2020
Relationship to debtor Members		_____	

Debtor Inspired Concepts, LLC
Name

Case number (if known) 20-20034

Name and address of recipient

30.2

Name

Relationship to debtor

31. Within 6 years before filing this case, has the debtor been a member of any consolidated group for tax purposes?

- ☒ No
☐ Yes. Identify below.

Name of the parent corporation

Employer Identification number of the parent corporation

EIN: _____

32. Within 6 years before filing this case, has the debtor as an employer been responsible for contributing to a pension fund?

- ☐ No
☒ Yes. Identify below.

Name of the pension fund

Employer Identification number of the pension fund

Inspired Concepts LLC 401(k) Profit Sharing Plan

EIN: 46-4401178

Part 14: Signature and Declaration

WARNING -- Bankruptcy fraud is a serious crime. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$500,000 or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

I have examined the information in this *Statement of Financial Affairs* and any attachments and have a reasonable belief that the information is true and correct.

I declare under penalty of perjury that the foregoing is true and correct.

Executed on 05/12/2020
MM / DD / YYYY

X

/s/ Jeff Neely

Printed name Jeff Neely

Signature of individual signing on behalf of the debtor

Position or relationship to debtor Member

Are additional pages to *Statement of Financial Affairs for Non-Individuals Filing for Bankruptcy* (Official Form 207) attached?

- ☐ No
☒ Yes

Debtor Name Inspired Concepts, LLCCase number (if known) 20-20034Continuation Sheet for Official Form 207**4) Payments or other transfers of property made within 1 year before filing this case that benefited any insider**

Levi Martin	555 S. Mission St., Mt. Pleasant, MI 48858	\$84,665.21
KJ Endeavors, LLC	555 S. Mission St., Mt. Pleasant, MI 48858	\$90,871.00
Joshua Neely	555 S. Mission St., Mt. Pleasant, MI 48858	\$83,511.36
Emma Neely	555 S. Mission St., Mt. Pleasant, MI 48858	\$28,557.90

7) Legal Actions

Mercantile Bank of Michigan v. Inspired Concepts, et al.

19-15986 CK

Breach of Contract

Isabella Circuit Court

300 N. Main St., Mount Pleasant, MI 48858

Pending

Ovens, LLC v. Inspired Concepts, LLC

19-002360 LT

Proceedings for possession. Order of Dismissal entered November 7, 2019 denying relief.

70th District Court

111 S. Michigan Ave., Saginaw, MI 48602

Concluded

Ovens, LLC v. Inspired Concepts, LLC, et al.

19-15901 CB

Breach of Contract. Judgment entered against Debtor December 6, 2019 in amount of \$78,745.

Isabella Circuit Court

300 N. Main St., Mount Pleasant, MI 48858

Concluded

Debtor Name Inspired Concepts, LLCCase number *(if known)* 20-20034**Continuation Sheet for Official Form 207**

LADCO, Inc. v. Inspired Concepts, LLC, et al.**1:19-10855 BC****Trademark infringement; breach of contract****U.S. District Court, E.D. Michigan****1000 Washington Ave., Bay City, MI 48708****Pending**

26d) Creditors**LaBelle Management****c/o Richard Milster, Esq., 240 William
St., #1000, Midland MI 48640**